## Pa500033961

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: DIGIHOOPOE IN	C					
DOCUMENT NUN	IBER: P25000033961						
	s of Amendment and fee are su	bmitted for filing.					
Please return all con	espondence concerning this ma	tter to the following:					
	CARLOS PEREZ						
	Name of Contact Person						
	WORLD TAX SERVICES AND MORE						
		Firm/ Company					
	4343 W WATERS AVE						
	Address						
	TAMPA, FL 33614						
	. , , , , , , , , , , , , , , , , , , ,	City/ State and Zip Code					
	CPEREZPROSVCSINC@G	MAIL.COM					
	•	sed for future annual report	notification)				
For further informati	on concerning this matter, plea:		249-2300				
Name	of Contact Person	at (at (	) 249-2300 de & Daytime Telephone Number				
Enclosed is a check	or the following amount made						
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

FILED
2025 JUL -7 AM 10: 06 DIGIHOOPOE INC (Name of Corporation as currently filed with the Florida Dept. of State) P25000033961 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: P.O. BOX 290653 (Mailing address MAY BE A POST OFFICE BOX) TEMPLE TERRANCE, FL 33687 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: . Florida (Circ) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President: T = Treasurer: S = Secretary: D = Director: TR = Trustee: C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change	<u>PT</u>	<u>John Do</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
I) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		<u> </u>
Add				
Remove				
5) Change		<del></del>		
Add				
Remove				
6) Change		_		
Add				
Remove				•

f amending or adding additional Ar Attach additional sheets, if necessary)	. (Be specific)
If an amendment provides for an ex-	change, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	nendment if not contained in the amendment itself:
(y not appacame, maicate wa)	

•

	07/01/2025	
The date of each amendment(s) ad date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment fil	e date)
<b>Note:</b> If the date inserted in this blocument's effective date on the Dep	ck does not meet the applicable statutory filing requing artment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	ted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for licient for approval.	the amendment(s)
	oved by the shareholders through voting groups. The function of the shareholders to vote separately on the ame	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	."	2025
	(voting group)	T L
07/01/2025		A T
Dated		※二 Ⅲ
Signature	al Moham	Shave not been stated on the country of the country
selected	ector, president or other officer – if directors or officers by an incorporator – if in the hands of a receiver, trust I fiduciary by that fiduciary)	ee, or other court
1	VALEED MOHAMMAD	
-	(Typed or printed name of person signing)	
_	Predident	
	(Title of person signing)	