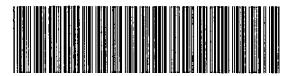
## P94000081444

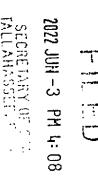
(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
J. HORNE			
AUG 17 2022			

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

NAME OF CORPO	RATION: DEL REY INVES	TMENT CORP.	
	IBER: P94000081444		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	itter to the following:	
	ALINA CARABALLO		
		Name of Contact Person	1
		Firm/ Company	<del></del>
	11312 NW 65 ST		
		Address	
	DORAL, FL 33178		
		City/ State and Zip Cod	e
	DELREYMIAMI@GMAIL.	СОМ	
	E-mail address; (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
ALINA CARABAL	_0	at (	724-5939
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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)

Street Address

Amendment Section

Division of Corporations

The Centre of Tallahassee

## Articles of Amendment to Articles of Incorporation of



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DEL REY INVESTMENT CORP.

2022 JUN -3 PM 4: 08

(Name (	of Corporation as curren	tly filed with the Florida Dept. of State)	
294000081444	TĂŬLAHASSEE, Francisco		
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.  s Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendm	
A. If amending name, enter the new na	ame of the corporation:		
∜A		The nev	
	Jorp, " "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp., A professional corporation name must contain the wor	
,		N/A	
<ul> <li>Enter new principal office address, Principal office address MUST BE A S</li> </ul>			
, 33			
. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A	
(1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	<i>0</i> /		
. If amanding the projectioned agent as	adden magistaned office ad	dress in Florida, enter the name of the	
new registered agent and/or the new			
Name of New Registered Agent	N/A		
Name of New Registered Agent			
		street address)	
		areet address)	
New Registered Office Address:	N/A	Florida	
		(City) (Zip Code)	
New Registered Agent's Signature, if c	hanaina Pagietarad Ago	nt.	
hereby accept the appointment as regist	tered agent. I am familia	r 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: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	þ	OLGA DEL REY	11322 NW 65 ST
Add			DORAL, FL 33178
XRemove			
2) Change	p	ALINA D. CARABALLO	11322 NW 65 ST
X Add			DORAL, FL 33178
Remove 3 ) Change	D	ALINA D. CARABALLO	11322 NW 65 ST
Add			DORAL, FL 33178
X Remove			
4) Change	D	OLGA DEL REY	11322 NW 65 ST
XAdd			DORAL, FL 33178
Remove			
51 Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

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<u>If an amendme</u>	nt provides for an	exchange, reclas	sification, or ca	ncellation of issu	ed shares,	
tif not any	implementing the licable, indicate N/z	<u>amendment it no</u>	ot contained in	the amendment if	<u>seit:</u>	
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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements. Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the ame sufficient for approval.	endment(s)
☐ The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following wach voting group entitled to vote separately on the amendment	g statement t(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
Dated	2022	
Signature	alma Cally	
select	director, president or other officer – if directors or officers have need, by an incorporator – if in the hands of a receiver, trustee, or onted fiduciary by that fiduciary)	iot been ther court
	ALINA D. CARABALLO	
	(Typed or printed name of person signing)	+.
	DIRECTOR	
	(Title of person signing)	