

P97000030498

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
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(D	ocument Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: IGNITE KNOWL	EDGE CORP.		
	BER: P97000030498			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Alexis Bucelo Diaz, Esq.			
		Name of Contact Person	n	
	Bucelo Diaz Law PLLC			
		Firm/ Company		
	2645 Executive Park Drive, S	Suite 643		
		Address		
	Weston, FL 33331			
		City/ State and Zip Cod	e	
	gutierrez.eliecer@gmail.con	n		
	- · ·	sed for future annual report	notification)	
For further informati Melissa Gutierrez	on concerning this matter, plea		495-2426	
Name	of Contact Person	at (Area Co) 495-2426 de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
An Di P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, 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 to Articles of Incorporation of

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(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P97000030498	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	2
(Principal office address MUST BE A STREET ADDRESS)	0024
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BON</u>)	
	<u> </u>
D. If amonding the registered agent and/our registered offer add	duese in Dismide, automate and a Cate
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
tume of the negligible and the	
(Florida :	treet address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agent thereby accept the appointment as registered agent. I am familian	nt:
r nereoy accept the appointment as registered agent. Tam jamuta	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.

X_Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	PSTD	_	GUTTERREZ, ELIECER	6228 CELLINI STREET
Add				CORAL GABLES, FL 33146
X Remove 2) Change	PSTD		Eliecer Gutierrez Revocable Trust dated June 10, 2014	6228 CELLINI STREET
X Add		_		CORAL GABLES, FL 33146
Remove Change		_		
Add				
Remove				
4) Change				
Add				<u>-</u>
Remove				
5) Change		-		
Add				
Remove				
6) Change		_		
Add				
Remove				

• • • • • • • • • • • • • • • • • • • •	icles, enter change(s) here: (Be specific)
•	-
	<u> </u>
	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	nument is not contained in the amendment usen:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/4)	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: $\frac{12}{12}$ $\frac{12}{2}$ $\frac{7.0}{24}$ date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without sharehol action was not required.	lder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
12/12/2024 Dated	
Signature Alexis Diaz	
Signature Alexas Diaz (By a director, president or other officer – if directors or officers have no	
selected, by an incorporator – if in the hands of a receiver, trustee, or of appointed fiduciary by that fiduciary)	ner court
Alexis Bucelo Diaz, Esq.	
(Typed or printed name of person signing)	
Attorney/Authorized Representative	
(Title of person signing)	