## P050000 68569

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CAJUL PROPE	ERTIES CORP.	
DOCUMENT NUMBER: P05000068569	·	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
BERENICE IPIA-FELICI	ANO	
<del></del>	Name of Contact Person	
PRATS FERNANDEZ &		
	Firm/ Company	
999 PONCE DE LEON B		
- STANCE DE CEON B.		<u> </u>
	Address	
CORAL GABLES, FL 33	134	
	City/ State and Zip Cod	e
ADMIN@PRASTFERNA	NDF7 COM	·
	used for future annual report	:6
2021-055. (10 0C	asea for future annual report	notification)
For further information concerning this matter, pl	lease call:	
BERENICE IPIA-FELICIANO	at (	, 444 8333
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made		,
☐ \$35 Filing Fee & S43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	S52.50 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	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

CAJUL PROPERTIES CORP.

(Name of Corporation as currently filed with the Florida Dept. of State P05000068569	) ·	<del></del>
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the fits Articles of Incorporation:	ollowing amendme	ent(s)
A. If amending name, enter the new name of the corporation:		
MUSAVI PROPERTIES CORP		
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abb "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A."	The new previation "Corp." contain the word	, . !
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
	S ~	
	7	
D. Ifa-andi-ada-ada-ada-ada-ada-ada-ada-ada-ada-a		T
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:		
		. I 
Name of New Registered Agent	<del></del> <del></del>	<b>7</b>
	<u> </u>	<u> </u>
(Floridu street address)		
New Registered Office Address: Florida		
(Ciry)	(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 pos	sition.	
Signature of Viv. Paris II.	<del>,_,</del>	
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>	John D	loe ·	
X Remove	<u>v</u>	Mike J	ones	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change		_		
Add			÷.	
Remove				
2) Change	<del></del>	<del>_</del>		
Add				
Remove Change	<del></del> .	-		
Add				
Remove				
4) Change		<del>-</del>		
Add				
Remove				-
5) Change		_		
Add				
Remove				
5) Change		-		
Add				
Remove				

ch additional sheets, if necessary). (Be specific)	
	-
	<del></del>
	·
amendment provides for an exchange, reclassification, or cancellation of issued shares,	
risions for implementing the amendment if not contained in the amendment itself.	
(if not applicable, indicate N/A)	
	<del>_</del>

date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after an	nendment file date)
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of director action was not required.	ors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of vot by the shareholders was/were sufficient for approval.	tes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gromust be separately provided for each voting group entitled to vote separately	oups. The following statement on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for	approval .
by	,,
Signature  (By a director, president or other officer – if directors selected, by an incorporator – if in the hands of a regardance appointed fiduciary by that fiduciary)	or officers have not been
Miguel Munera /	
. (Typed or printed name of person	signing)
President	
(Title of person signing)	