## F20000003347

(Re	equestor's Name)	
•	,	
(Ad	Idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone #	<del>¥</del> )
PICK-UP	☐ WAIT	MAIL MAIL
/D:	isiness Entity Name	<u>,,                                     </u>
(50	isiness chury Name	<del>")</del>
(Dc	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

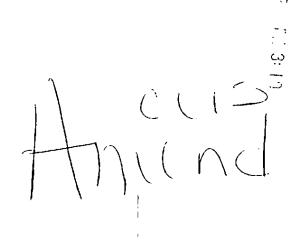
Office Use Only



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Jail 1 1 2021

! ALBRITTON

#### **COVER LETTER**

SUBJECT:	Nama	of Corporation	<del></del>	
DOCUMENT NU	F20000003347 MBER:	•		
The enclosed Ame	ndment and fee are submitted for	filing.		
Please return all co	rrespondence concerning this ma	tter to the followin	g:	
VICTORIA MORA	AES			
	Name of Contact Person	<del></del> -	_	
ASSELFIS INTER	RNATIONAL LLC			
	Firm/Company		_	
7901 KINGSPOIN	TTE PARKWAY #10			
	Address		_	
ORLANDO FL 32	819			
	City/State and Zip Code		<del>-</del>	
VICTORIA@ASS	ELFIS.COM			
E-mail addre	ss: (to be used for future annual r	eport notification)	<del>-</del>	
For further information VICTORIA MOR.	ation concerning this matter, pleas AES	407	826-1034 )	
Nam	e of Contact Person	Area Code	e & Daytime	Telephone Number
Enclosed is a chec	k for the following amount:			
\$35 Filing Fee	■ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Fil Certified Co	~	☐ \$52.50 Filing Fee. Certificate of Status Certified Copy

#### 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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 16, 2020

VISTORIA MORAES 7901 KINGPOINTE PARKWAY #10 ORLANDO, FL 32819

SUBJECT: GLOBALFILTERS S.A. CORP

Ref. Number: F20000003347

We have received your document for GLOBALFILTERS S.A. CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 720A00025525

Irene Albritton Regulatory Specialist II

www.sunbiz.org

# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

#### SECTION I (1-3 MUST BE COMPLETED)

F2	20000003347				
	(Document n	umber of corporation	n (if known)		
GLOBALFILTERS S.A. CORP					
		07/31	of the Department of 1/2020		
(Incorporated und	ler laws of)	,,	(Date authorized to c	do business in F	Florida)
		SECTION II			
(+	4-7 COMPLETE OF		CABLE CHANGES)		
If the amendment changes the name o incorporation?	-			of its jurisdicti	ion of
		.=			
(Name of corporation after the amend not contained in new name of the corp	lment, adding suffix 'poration)	"corporation," "com	pany," or "incorporate	d," or appropri	ate abbreviati
(If new name is unavailable in Florida	enter alternate com	orate name adonted	for the numose of tran	sacting busines	ss in Florida)
(11 new maine is unavariable in 1 fortida	, emer anernace corps	orace marine adopted	tor the purpose of truit	Sacring outline	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
. If the amendment changes the pe	riod of duration, indi	icate new period of o	luration.		
_	<del>-</del>	(New duration)			
. If the amendment changes the jui	risdiction of incorpor	ration, indicate new	jurisdiction.		- `
					. •
		(New jurisdiction)			3
					•
If amending the registered agent ar			da, enter the name of	the	
new registered agent and/or the new	<u>w registered office a</u> ASSELFIS INTERN				دب
Name of New Registered Agent		NATIONALILLO			
		TE PARKWAY SUF	ΓE 10		
	(Flo	orida street address)		_	
	RLANDÓ		, Flor	32819 ida	
New Registered Office Address:		(City)	, 1101	(Zip Code	e)
New Registered Agent's Signature I hereby accept the appointment as re			accept the obligations	of the position.	

FRANKLIN

(Typed or printed name of person signing)

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change: Type of Action Address Title/ Capacity Name 1 MIDSOUTH TRADE SA Title D JORGE CANNING N 2427 MONTE VIDEO-URUGUAY Remove KM 13 ACARAY RUTA INTERNACIONAL N 7 **BRAVAR SA** Title D PRIMI R PISO NALA 2 MENGA GUAZU ALIO PARANA, PARAGUAY PS Remove DE SOUZA, FRANKLIN AUGUSTO Title P AV WASHINGTON LUIS 1576 **☑**Add SANTO AMARO, SP 04662-002 BR Remove Title VP DE SOUZA, EDUARDO PIMENTA AV WASHINGTON LUIS 1576 ☑Add SANTO AMARO, SP 04662-002 BR Remove  $\square$ Add Remove 10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated. FRANKLIN (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

FILING FEE \$35.00