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Division of Corporations

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COR AMND/RESTATE/CORRECT OR O/D RESIGN PLANET WORLD CORPORATION

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: PLANET WORLD CORPORATION P02000099534 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rafaela Martins Name of Contact Person Account Bookkeeping Corp Firm/ Company 5301 Conroy rd ste 140 Address Orlando, FL 32811 City/ State and Zip Code INFO@ABKCORP.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407 898-1757

Area Code & Daytime Telephone Number Rafacla Martins Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52,50 Filing Fee □\$43.75 Filing Fee & **■ \$35** Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation of

PLANET WORLD C	ORPORATION			
(Name of Corporation as currently	filed with the Florida Dept. of State)			•
P020000	99534			
. (Document Number of C	Corporation (if known)			•
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fl its Articles of Incorporation:	ortda Profit Corporation adopts the following	g amendn	rent(s) to)
A. If amending name, enter the new name of the corporation:				
		The ne	`W	
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must c			
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)		TALLANASSEE	17 OCT 25	70
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	STATE LONDA	M 9: 21	©
Name of New Registered Agent				
(Florida street	address)			
New Registered Office Address:	, Florida			
(C	ity) (Zip C	ode)		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with Signature of New Reg.	h and accept the obligations of the position. istered Agent, if changing			

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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)

Pleuse 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 us a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

Example: X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	<u>neş</u>	
_X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP		De Azevedo, Guilherme J M	8013 Cool Breeze Dr., Apt 110
Add				ORLANDO, FL 32819
X Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		<u></u>		
Add				
Remove				

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(Attac	nending or addin ch <i>additional she</i>	ig additional A ets, if necessary	rticles, enter c). (Be specifi	hange(s) here c)	:			
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				- <u> </u>				
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	<u> </u>							
			·			·		
							_,	
'. If <u>ar</u>	n amendment pr	ovides for an e	xchange, recla	ssification, or	cancellation of	issued shares,		
pro	ovisions for Impl (if not applicable	ementing the a	<u>mendment if n</u>	ot contained i	<u>n the amendm</u>	ent itself:		
			<u> </u>				 	
		-						
			40 V					

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The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date Inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date with partment of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(3) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendmend(s) was/were sufficient for approval	
by	# · · · · · · · · · · · · · · · · · · ·	
	(voitng group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
	october 24th; 2017	
Dated		•
Signatule	rector, president or other officer - If directors or officers have not been	
(By & di	by an incorporator if in the hands of a receiver, trustee, or other court	
appoint	ed fiduciary by that fiduciary)	
	MONICA M PALHETA	. ,
	(Typed or printed name of person signing)	
	OP	
•	(Title of nerson strains)	

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