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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: LUIZ FEITOSO N	HETO CORP	
	IBER: P19000074445		
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	MARCO REIS		
		Name of Contact Perso	11
	USA TAX CORP		
		Firm/ Company	····
	591 E SAMPLE RD		
		Address	
	POMPANO BEACH FL 330	64	
		City/ State and Zip Cod	c
1111	77.437.407.477.3471.40.44	,	
USF	ATAX@USATAXFL.COM		
	n-mail address: (to be u	sed for future annual report	notification)
ror turther informati	on concerning this matter, pleas	se call:	
MARCO REIS	of Contact Person	954 at (788-1818
Name	of Contact Person	Area Co	de & Daytime Telephone Number
	or the following amount made		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Ma</u>	iling Address	Street	Address
Amendment Section Division of Corporations			Inient Section
			on of Corporations
), Box 6327		Building
141	lahassee, FL 32314		Executive Center Circle assee, FL 32301
		ranana	assee, rt. 52501

Articles of Amendment to Articles of Incorporation of

LUIZ FEITOSO NETO CORP

(Name of Corporation as curren	ntly filed with the Florida Dept, of State)	
P19000074445		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation;	is Florida Profit Corporation adopts the following ame	ndment(s) to
A. If amending name, enter the new name of the corporation:		
V.F.5 SERVICES CO	ORP The	new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbrevi "Co". A professional corporation name must contai	iation
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		_
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		19
Name of New Registered Agent		9 0CT 24
	·	. 173
	street address)	
New Registered Office Address:	(City) , Florida (Zip Codg)	LS :01 Ha
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia.		
Signature of New	· Registered Agent, if changing	

If amendiag 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			<u> </u>
Add			and the contract of the contra
Remove			
4) Change			- Fig. 5.
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

les, enter change(s) here: (Be specific)		
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nge reclassification or cancellation of issued tha	L **	
dment if not contained in the amendment itself:	2	
	17 A.C.	
	<u>.</u> ~.	
	<u> </u>	
	×	4
		
	· · ·	
		inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:

The date of each amendment(s)	10/21/2019 adoption:	, if other than the
date this document was signed.		, ii wher than the
)(Effective date <u>if applicable</u> :	/21/2019	
enective date it appreciote.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	19 OCT
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	19 0CT 24 PH 10: 9
10/21/20 Dated	19	24 PH
Signature	Mul	PN 10: 54
selec	director, president of other officer – if directors or officers have not been eted, by an ingorporator – if in the hands of a receiver, trustee, or other court	**
арре	inted fiduciary by that fiduciary)	
	MARCELO DE OLIVEIRA ROCHA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	