P190000082318

(Red	questor's Name)	
(Add	dress)	
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(, (3.		
(City	y/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	· · · · · · · · · · · · · · · · · · ·
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to I	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: REVOLUGROUP	USA INC			
DOCUMENT NUM					
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	itter to the following:			
	ITALO TORRESE				
		Name of Contact Persor	1		
	SOFTLANDING GLOBAL LLC				
		Firm/ Company			
	44) BRICKELL AVE. SUIT	• •			
		Address			
	MIAMI, FLORIDA 33131				
		City/ State and Zip Code	v		
	ITALO.TORRESE@SOFTL	ANDINGGLOBAL.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, plea		608-5170		
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number		
Enclosed is a check for	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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, F1, 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

REVOLUGROUP USA INC.

	ation as currently filed with the Florida Dept. of State)	
219000082318		
(Doct	ument Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006. Floring Articles of Incorporation:	ida Statutes, this Florida Profit Corporation adopts the following amendmen	l(s) to
A. If amending name, enter the new name of the	corporation:	
₹/A		
name must be distinguishable and contain the word " Inc.," or Co.," or the designation "Corp," "Inc chartered," "professional association," or the abb	"corporation," "company," or "incorporated" or the abbreviation "Corp.," c." or "Co". A professional corporation name must contain the word previation "P.A."	
Enter new principal office address, if applicah	ole:	,
Principal office address <u>MUST BE A STREET AL</u>		5.78 M.U.
		-
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE B	BOX)	
	tomad office white-one is Dismids assess the same field	
. If amending the registered agent and/or regist	tereu office address in Fiorida, enter the name of the	
new registered agent and/or the new registered	d office address:	
. If amending the registered agent and/or regist new registered agent and/or the new registered Name of New Registered Agent	d office address:	
N// N	d office address:	
new registered agent and/or the new registered	(Florida street address)	
new registered agent and/or the new registered	d office address:	

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)

Example:

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 Doe		
X Remove	<u>V</u>	Mike Jones	<u>s</u>	
X Add	<u>sv</u>	Sally Smit	<u>h</u>	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	<u>ame</u>	<u>Addres</u> s
1)Change	VP	^	LFREDO MANRESA RUIZ	78 SW 7TH STREET
XAdd				5TH FLOOR
Remove				MIAMI, FLORIDA 33130
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4)Change				
Add				
Remove				
5)Change				
Remove				
6) Change				
Add				
Remove				

(Attach addir	or adding additional Art ional sheets, if necessary).	(Be specific)	o <u>rmere</u> ,			
N/A	order, greenady.	are specyter				
180A						_
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F. If an amend	ment provides for an excl	anne reclassificatio	or cancellation	of issued shares		
provisions	<u>or implementing the ame</u>	ndment if not conta	ined in the amend	ment itself:		
(if not a	pplicable, indicate N/A)					
N/A						
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The date of each amendment(s) adopti	10 30 2020	
date this document was signed	OR:	, if other than the
Effective date <u>if applicable</u> :		
	mo more than 90 days after amendment file dat	e)
Note: If the date inserted in this block in document's effective date on the Departing	loes not meet the applicable statutory filing requirement of State's records	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was were adopted action was not required	by the incorporators, or board of directors without share	holder action and shareholder
The amendment(s) was were adopted by the shareholders was were sufficient	by the shareholders. The number of votes east for the ai it for approval	nendineni(5)
musi ve separatete providea for each	by the shareholders through voting groups. The follow, coting group entitled to vote separately on the amendment	ng statement pilis)
by	amendment(s) was were sufficient for approval	
ii,	tvoting groups	
Dated 10.30-2020 Signature	UUUU	
(By a director selected, by a	president or other officer if directors or officers have incorporator - if in the hands of a receiver, trustee, or iciary by that fiduciary)	not been other court
STEV	EMARSHALI.	
	(Typed or printed name of person signing)	
PRES	DENT	
	(Fitle of person signing)	

•	10/30/2020	,
	option:	, if other than the
date this document was signed.	1/2020	
Effective date <u>if applicable</u> :	2/2020	
Encore date it appareame.	(no more than 90 days aft	er amendment file date)
Note: If the date inserted in this bl document's effective date on the De		atory tiling requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of d	lirectors without shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number flicient for approval.	of votes east for the amendment(s)
must be separately provided for	roved by the shareholders through votice ach voting group entitled to vote sepa	rately on the amendment(s):
	or the amendment(s) was/were sufficient	• •
by	(voting group)	······································
10/30/2020 Dated		
Signature		
selected	rector, president or other officer – if di , by an incorporator – if in the hands o ed fiduciary by that fiduciary)	
	STEVE MARSHALL	
	(Typed or printed name of p	erson signing)
	PRESIDENT	

(Title of person signing)