P210000 70133

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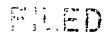
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COVER LETTER

TO: Amendment Section Division of Corporations

SAME OF CORPO	RATION: ALL GOODS AM	ERICAN BUSINESS, COI 	₹P 	
OOCUMENT NUM	BER: P21000070133			
he enclosed . Irticle	s of Amendment and fee are su	binitied for filing.		
lease returnall corr	espondence concerning this ma	tter to the following:		
	GLAUCIA BASTOS			
	Name of Contact Person			
	THE TRUST CIRCLE SERV	/ICES LLC		
Firm: Company				
	1001 EAST SAMPLE ROAT) 10E		
	Address			
	POMPANO BEACH FLORIDA 33064			
	City! State and Zip Code			
•	ATENDIMENTOTHETRUSTCIRCLE@GMAIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
	on concerning this matter, plead		245-9123	
8 AUCIA BASTOS Name of Contact Person		Area Co	de & Daytime Telephone Number	
inclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐ \$43,75 Eding Fee & Certificate of Status	☐(\$43.75 Filling Fee & 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			Address Iment 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



ALL GOODS AMERICAN BUSINESS, CORP.

(Name of Corporation as currently filed w	ith the Florida Deni 2 State) 7 PM 3: 36
21000070133	OSCIL STOT OTATE
(Document Number of Corpora	ntion (if known) ALLAHADSEE, FL
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida F</i> its Articles of Incorporation:	Profit Corporation adopts the following amendments:
A. If amending name, enter the new name of the corporation:	
ALLGOODS AMERICAN BUSINESS, CORP	The new
name must be distinguishable and contain the word "corporation," "company, "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A profess "chartered." "professional association," or the abbreviation "P.A."	" or "incorporated" or the abbreviation "Corp"
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
If amending the registered agent and/or registered office address in Fl new registered agent and/or the new registered office address:	lorida, enter the name of the
Name of New Registered Agent	
tFlorida street addres	SI.
New Registered Office Address:	, Florida
(Сиу)	(Zip Code)
iew Registered Agent's Signature, if changing Registered Agent: herein accept the appointment as registered agent. I am familiar with and c	accent the obligations of the position
	accept the straightful straigh
Signature of New Registered	Agent, if changing
Sheek 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:

 $P = President; \ V = Vice President; \ T = Treasurer, \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Clief Executive Officer; \ CFO = Clief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	P <u>T</u>	John Doe			
<u>Y</u> Remove	· <u>\(\tau \)</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change					
Add					
Remove					
2) Change					
Add					
Remove 3 r Change		<u> </u>	-		
Add				- 	· · · · · · · · · · · · · · · · · · ·
Remove					
4) Change					
Add					
Remove					
51 Change					
Add					
Remove					
6) Change			 -		
Add					
Remove					

	nending or adding additional Articles, enter change(s) here:	
(Alti	ch additional sheets, if necessary). (Be specific)	
-		
· · · -		
<u>It a</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself:	
1!!	(if not applicable, indicate NA)	
٠.		

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	tno more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
Fig. The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were act by the shareholders was were:	lopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	nent(s)
	oproved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendmentist:	
"The number of votes car	at for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
08/05/202 Dated		
	12 Orglos AHIE director, president or other officer - if directors or officers have not b	
	ed, by an incorporator—if in the hands of a receiver, trustee, or other nted fiduciary by that fiduciary)	court
	LUIZ CARLOS ATTIE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	