

P22000079675

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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J. HORNE
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SECRETARY
FALL ARIZONA

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FALL ARIZONA

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from this account: 120210000160: \$ 35.00

Authorization Signature: Sam Gull :

R21 IMPORT & EXPORT CORP P22000079675

BUSINESS NAME _____ **DOCUMENT #** _____

Certified Copy of Articles of Incorporation

Certificate of Status

NEW FILINGS

☐ Profit Corp
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other
☐ CORP
☐ LLLP

AMMENDMENTS

X Amendment

☐ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ Revocation of Dissolution
☐ Merger
☐ Conversion
☐ Amended and restated Articles
☐ Statement of Authority

OTHER FILINGS

____ Annual Report
____ Fictitious Name
____ APOSTILLE
____ Country

REGISTRATION/QUALIFICATIONS

☐ Foreign filing
☒ Limited Partnership
☐ Reinstatement
 Other

EXAMINER'S INITIALS:

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from this account: I20210000160: **\$ 35.00**

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EXAMINER'S INITIALS: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: R21 IMPORT & EXPORT CORP

DOCUMENT NUMBER: P22000079675

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LAMEIRO DIZ, DIEGO

Name of Contact Person

Firm/ Company

Address

17570 ATLANTIC BLVD.SUNNY ISLES BEACH, FL 33160

City/ State and Zip Code

heber.benfica@icloud.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heber Benfica at (786) 7197688
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 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

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

R21 IMPORT & EXPORT CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P22000079675

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

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**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

FILED
2023 APR 13 PM 2:39
SECRETARY OF
STATE
TALLAHASSEE

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 = 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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
-----------------	-----------	-----------------

X Remove V Mike Jones

<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>
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Type of Action
(Check One)

Title

NameAddress

1) <input type="checkbox"/> Change	VP	LAMEIRO DIZ, AMANDA HELEN	8949 BISMARCK PALM RD
<input type="checkbox"/> Add			KISSIMMEE, FL 34747
<input checked="" type="checkbox"/> Remove			

2) _____ Change
_____ Add
_____ Remove

3) _____ Change
_____ Add
_____ Remove

4) Change

Add

Remove

5) _____ Change _____

_____ Add _____

_____ Remove _____

6) ☐ Change ☐ ☐ ☐

☐ Add ☐ ☐ ☐

☐ Remove ☐ ☐ ☐

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

A new amendment whereby the 500 shares of AMANDA HELENA LAMEIRO DIZ are cancelled.

Hence, with this new amendment the 1000 shares issued by the company belong solely to DIEGO LAMEIRO DIZ

The date of each amendment(s) adoption: April 5, 2023 if other than the date this document was signed

Effective date if applicable: April 5, 2023
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____
(voting group)

Dated April 5, 2023

Signature Diego Lameiro Diz
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Diego Lameiro Diz

(Typed or printed name of person signing)

President

(Title of person signing)