P9900000 758

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of 8	Status
Special Instructions	s to Filing Officer:	
		'

Office Use Only



100333126111

08/26/19--91010--025 ****4**3.75

FILED MANUS 26 P S IT

A PENNERTY SEED & SEED U 3 SOUR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: PICANHA NA BE	RASA I, INC		
DOCUMENT NUM	P9900000075S			
The enclosed Article	s of Amendment and fee are st	ibmitted for filing.		
Please return all corr	espondence concerning this ma	itter to the following:		
	EDERMIS LUGO			
		Name of Contact Person	1	
	PICANHA NA BRASA I, IN	۱C		
		Firm/ Company		
	234 NE 1 ST			
		Address	· · · · · · · · · · · · · · · · · · ·	
	MIAMI, FL 33132			
		City/ State and Zip Cod	 e	
נינ ו ני	mis@hotmail.com			
	_	sed for future annual report	notification)	
	·			
For further informati	on concerning this matter, plea	se call:		
EDERMIS LUGO		917		
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	☐S43.75 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 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

PICANHA NA BRASA I, INC

FILED

"Corp" "Inc" or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain toword "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 MAY BE A PONT 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	(<u>Name</u>	of Corporation as currently			•
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendrits Articles of Incorporation: A. If amending name, enter the new name of the corporation: The manne must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatie "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain to 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 PONT OFFICE BOX) D. If amending the registered agent and/or registered office address: Nume of New Registered Agent EDERMIS LUGO 234 NE 1st ST (Florida street address) MIAMI Florida 33132	P9900000758				
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amends its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The manner must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviata "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.," A professional corporation name must contain to 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: Name of New Registered Agent EDERMIS LUGO 234 NE 1st ST (Florida street address) MIAMI Florida (City) New Registered Office Address: MIAMI Florida (City) New Registered Agent's Signature, if changing Registered Agent:		(Document Number of C	Corporation (if known)	nege MRY.OR	STAREL.
The manner must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain to 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: Name of New Registered Agent* EDERMIS LUGO	Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corporalion	radopts the follow	COÑIÑĂ ng amendment(s) t
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio "Corp., "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain to 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	A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio "Corp., "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain to 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					Th
C. Enter new mailing address, if applicable: (Muiling 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	"Corp.," "Inc.," or Co.," or the design	nation "Corp." "Inc." or "C	o". A professional corp	rporated" or the oration name mus	abbreviation
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	B. Enter new principal office address,	if applicable:			
O. H 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 EDERMIS LUGO					
O. 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 EDERMIS LUGO					
O. H 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 EDERMIS LUGO					
O. 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 EDERMIS LUGO	C. Enter new mailing address, if appl	icable:			
Name of New Registered Agent EDERMIS LUGO					
Name of New Registered Agent New Registered Office Address: New Registered Office Address: City City					
Name of New Registered Agent New Registered Office Address: New Registered Office Address: City City				-	
Name of New Registered Agent New Registered Office Address: New Registered Office Address: City City					
Name of New Registered Agent Sew Registered Agent's Signature, if changing Registered Agent: Name of New Registered Agent's Signature, if changing Registered Agent: EDERMIS LUGO			s in Florida, enter the n	ame of the	
Name of New Registered Agent 234 NE 1st ST (Florida street address) New Registered Office Address: (City) (City) (Zip Code) Sew Registered Agent's Signature, if changing Registered Agent:	new registered agent and/or the ne	w registered office address:			
234 NE 1st ST (Florida street address) New Registered Office Address: (City) (City) Sew Registered Agent's Signature, if changing Registered Agent:	Name of New Registered Agent	EDERMIS LUGO			
New Registered Office Address: (City) Florida 33132 (Zip Code) Sew Registered Agent's Signature, if changing Registered Agent:		234 NE 1st ST			_
New Registered Office Address: (City) (Zip Code) Sew Registered Agent's Signature, if changing Registered Agent:		(Florida strev	address)	<u> </u>	
(City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	None Projectional (When Addresses	МІАМІ		33132	
Sew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Llemy	New Registered Office Address.	10	iter		Codes
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.				·	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Leany					
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Agent's Signature, if c	hanging Registered Agent:			
Edeing C.	nereny accept the appointment as regist	ered agent. I am familiar wit	h and accept the obligation	ons of the position.	
Clein (.		D -	2		
* * *** \		Edem (
Signature of New Registered Agent, if changing		Signature of New Reg			_

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: X Change	<u>PT</u>	John Doe			
X Remove	\underline{V}	Mike Jones			
X Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	PSTD	FERNANDO LUGO	234 NE 1 ST		
Add			MIAMI FI. 33132		
X Remove					
2) Change	P	EDERMIS LUGO	234 NE 1ST		
X Add			MIAMI FL 33132		
Remove			141.0		
3) Change		_			
Add					
Remove					
4) Change					
Add					
Remove			·-		
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

f amending or adding additional Attach additional sheets, if necessa	ry). (Be specific)	•			
					
			-		
		·			
	-				
·					
			<u>-</u>		
			J-110.		
· ·					-
		-	"		
				_	
			_		
an amendment provides for an oppositions for implementing the	exchange, reclassifica amendment if not cou	ition, or cancellati	<u>ion of issued sha</u> endment itself:	ires,	
(if not applicable, indicate N/A	()		Maniem Hoem.		
		-			
	· - · · · · .				-0.0
		· <u>-</u>			_
			-		
					

08/22/2019 The date of each amendment(s) adoption:	
date this document was signed.	other than the
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
08/22/2019	
Dated	
Signature C.	
(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)	
EDERMIS LUGO	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)