P190000 44934

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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: GATORBEE COR	P	
DOCUMENT NUM	IBER: P19000044934		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Caio Brito		
		Name of Contact Person	
	Drummond Legal Advisors F	TLC	
		Firm/ Company	
	840 Summer Street, Suite 20	• •	
		Address	
	Boston / Massachusetts / 021	27	
		City/ State and Zip Code	
rtori	res@drummondadvisors.com		
	E-mail address: (to be us	sed for future annual report	notification)
Dag Garbag in François	on aunacumina this matter phos	eo goll:	
roi turmei mioimati	on concerning this matter, pleas	se can.	
Caio Brito		at (781	770-0005 ext. 81
Name	of Contact Person	Area Cod	le & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	S43.75 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)
Ar Di P.G	ailing Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amendi Division The Ce	Address ment Section n of Corporations entre of Tallahassee f. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

GATORBEE CORP	
(Name of Corporation a	as currently filed with the Florida Dept. of State)
P19000044934	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	orațion:
N/A	The new
	oration," "company," or "incorporated" or the abbreviation "Corp.," r "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	SSS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A LEGISTROP STATE OF STATE
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	
Name of New Registered Agent N/A	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	n familiar with and accept the obligations of the position.
Signatur	e of New Registered Agent, if changing

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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove 3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5)Change		N/A	
Add			
Remove			
6) Change		N/A 	
Add	F		
Remove			
		Page 2 of 4	
(Attach additional she	ets, if ne	ional Articles, enter change(s) here: cessary). (Be specific) ticles of Incorporation shall be amended and read:	. n

				
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If an amendment provides for an exchange, reclas				
If an amendment provides for an exchange, reclas provisions for implementing the amendment if no (if not applicable, indicate N/A)				
provisions for implementing the amendment if no (if not applicable, indicate N/A)				
provisions for implementing the amendment if no (if not applicable, indicate N/A)				
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provisions for implementing the amendment if no (if not applicable, indicate N/A) A	ot contained in the amendm			

(no more than 90 days after amendment file date)

'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 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 (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. Signature (By a director, president or other officer – if directors or officers have not been selected; by an incorporator Inf in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Marco Antonio Ferraz Junior (Typed or printed name of person signing)

Director

(Title of person signing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the