546200

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I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: <u>Transal Corp</u>	oration			
DOCUMENT NUMB	er: <u>546200</u>				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Marcello Sardenberg				
		Name of Contact Person	1		
	Transal Corporation				
·		Firm/ Company			
	2121 SW 3rd Avenue,	Suite #800			
		Address			
	Miami, Florida 33129				
		City/ State and Zip Cod	e		
	msardenberg@transal.com				
	E-mail address: (to be us	sed for future annual report	notification)		
	concerning this matter, pleas		FF6 2607		
Marco Colmenarez Name of Contact Person		at (786			
			, ,		
Enclosed is a check for	the following amount made	payable to the Florida Dep	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)		
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment

	Articles of Incorporation	
Tran	50 COLDICATION ation as currently filed with the Florida Dept. of State)	
(Name of Corpora	511200	
(Doc	cument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florits Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the	corporation:	
		The new
	"corporation," "company," or "incorporated" or the abbrevia ic," or "Co", A professional corporation name must cont breviation "P.A."	
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET A)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	BOX)	2070
		· · · · · · · · · · · · · · · · · · ·
B. Harris Paris I. and A.		
new registered agent and/or the new registered	stered office address in Florida, enter the name of the ed office address:	2: 24
Name of New Registered Agent		<i>⊊</i> —
	(Florida street address)	
New Registered Office Address:	. Florida	
	(City) (Zi	p Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	Registered Agent: t. I am familiar with and accept the obligations of the position	ı.
	gnature of New Registered Agent, if changing	

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)

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 Remove X Add Type of Action (Check One)	<u>v</u> <u>sv</u>	Mike Jones	
Type of Action	<u>sv</u>		
		Sally Smith	
	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>X</u> Change	DS	Rodolfo E. Pita	2121 SW 3rd Avenue, Suite #800, Miami, Florida 33129
Remove 2) Change X Add	DS	Marcello Sardenberg	2121 SW 3rd Avenue, Suite #800, Miami, Florida 33129
Remove Change Add		.	
Remove 4) Change Add Remove			
5) Change Add			
Remove 6) Change Add Remove			

	Attach additional sheets, if necessary). (Be specific)
	_
r. I	f 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)
-	
-	
<u>-</u>	

The date of each amendment	(s) adoption: September 30th, 2020	, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	September 30th, 2020	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this che Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☑ The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/weby the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendmenere sufficient for approval.	1(5)
	re approved by the shareholders through voting groups. The following states of for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
Dated Sept	ember 30th, 2020	
Signature	(DE) Z() (
(B	y a director, president or other officer - if directors or officers have not beer	 1
Se	lected, by an incorporator – if in the hands of a receiver, trustee, or other con	urt
aŗ	pointed fiduciary by that fiduciary)	
	Rodolfo E. Pita	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	