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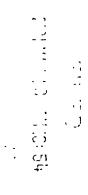




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COVER LETTER

TO: Amendment Section . Division of Corporations

NAME OF COR	PORATION: AMHM INTERN	NACIONAL LLC	
DOCUMENT NU	MBER: L20000374911		
The enclosed Artic	cles of Amendment and fee are s	submitted for filing.	
Please return all co	rrespondence concerning this n	natter to the following:	
	JOSE DE SARIO		
		Name of Contact Perso	on
	AMHM INTERNACIONAL	L LLC	
		Firm/ Company	
	12125 updike aly. Orlando,	•	
		Address	
	Orlando, FL 32832		
		City/ State and Zip Coo	ie
	himadmajzoub@gmail.com		
		sed for future annual repor	t polification)
For further informate	ion concerning this matter, plea	se call; at (at (\ 4912592
Nam	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made		•
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

AMHM INTERNACIONAL LLC

(Name of	Corporation as currently filed with the F	orida Dept. of State)
L20000374911	_	- <u> </u>
	(Document Number of Corporation (if ki	nown)
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	006, Florida Statutes, this Florida Profit Corp	poration adopts the following amendment(s)
A. If amending name, enter the new nar	me of the corporation:	
name must be distinguishable and contain w "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	he word "corporation," "company," or "inco orp," "Inc," or "Co". A professional corp or the abbreviation "P.A."	The prporated" or the abbreviation "Corp.," poration name must contain the word
3. Enter new principal office address, if Principal office address <u>MUST BE A STI</u>	applicable: REET ADDRESS)	
Enter new mailing address, if applica (Mailing address MAY BE A POST O) If amending the registered agent and/new registered agent and/or the new registered agent.	(or registered office address in Florida, ent	er the name of the
Name of New Registered Agent	Jose De Sario	
	12125 Updoke Aly (Florida street address) Oplando (City)	. Florida <u>32832</u> (Zip Code)
ew Registered Agent's Signature, if char hereby accept the appointment as registere	nging Registered Agent: ad agent. I am familiar with and accept the o Signature of New Registered Agent, if ch	
eck if applicable	, , , , , , , , , , , , , , , , , , ,	
The amendment(s) is/are being filed pursu	uant to s. 607.0120 (11) (c), F.S.	in the second

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> <u>Joh</u>	n Doc	
X Remove	<u>V</u> <u>Mik</u>	ke Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	Title	Name	Address
1)Change	MGRM	JOSE DE SARIO	12125 updike aly. Orlando, FL 328:
X Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			• 1
6) Change			
Add			
Кетюче			<u> </u>

	ding additional Artic sheets, if necessary).	(Be specific)			
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ovisions for imp	lementing the amend	<u>Iment if not contain</u>	<u>ned in the amendme</u>	ent itself:	
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The date of each amendment(s) a	option: if other th
date this document was signed.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
05-0	2021
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the Do	ock does not meet the applicable statutory filing requirements, this date will not be listed artment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add action was not required.	ted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	nted by the shareholders. The number of votes east for the amendment(s) ficient for approval.
☐ The amendment(s) was/were ap must be separately provided for	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast	or the amendment(s) was/were sufficient for approval
BOARD OF DIRECT	RS _ "
by	(voting group)
selecto	ector, president of other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)
арроп	
	Himad Majzoub
	(Typed or printed name of person signing)
	MGRM
	(Title of person signing)

the