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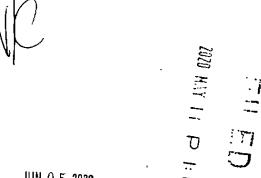
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION		ALVATION, CORP.	_	
DOCUMENT NUMBER: _	N13000000900			
The enclosed Articles of Am	endment and fee are sub	mitted for filing.		
Please return all corresponde	nce concerning this matt	er to the following:		
PATRICIA I. NUNEZ REY	ES			
	·	(Name of Contact Pe	rson)	
MIAMI INCOME TAX CO	RP.			
		(Firm/ Company)	
10855 SW 112TH AVENU	E APT 317			
		(Address)		
MIAMI, FL 33176				
	····	(City/ State and Zip C	Code)	
INFO@MIAMHINCOMETA	AX.COM			
Е	-mail address: (to be use	d for future annual rep	ort notification	1)
For further information conc	erning this matter, please	e call:		
PATRICIA I. NUNEZ REY	ES	at	786-7130399	
	(Name of Contact Persor			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made p	ayable to the Florida I	Department of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi Certif	Difiling Fee icate of Status ied Copy tional Copy is osed)
Mailing A	ddress	Str	eet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

TERRA PLANET SALVATION, CORP.

(Name of Corporation as currently filed with the Florida D	ept. of State)	
N13000000900		
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corpo	ration adopts the following
A. If amending name, enter the new name of the corporation	on:	
TERRA PLANET FOUNDATION, CORP.		The new
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name	ion" or "incorporated" or the abbre	viation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		20
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		.]
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		℧ ;
(stuting datiess may be a rost of race box)		•••
		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office as	e address in Florida, enter the nan ddress:	<u>re of the</u>
Name of New Registered Agent.		
	(Florida street addre	55)
New Registered Office Address:		
<u></u>		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: miliar with and accept the obligation.	s of the position.
Si_	gnature of New Registered Agent, if c	hanging

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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	Title		Name	Address
1) Change Add				
Remove				
2) Change Add				
Remove 3) Remove Add Remove		_	· · · · · · · · · · · · · · · · · · ·	
4) Change Add				
Remove				-
51 Change Add		-		
Remove				
6) Change Add				
Remove				
E. If amending or addir (attach additional shee			cles, enter change(s) here: (Be specific)	
NONE				
	· · · - <u>- · · · · · · · · · · · · · · ·</u>			
			- =	

NONE	
	
	
The date of each amendment(s) adoption: 05/01/2020	if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<u>Note:</u> 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 members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated	05/01/2020
Signatur	e Wilson Gonzalez
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	WILSON GONZALEZ
	(Typed or printed name of person signing)
	PD