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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BRAZIL A	MERICA (COUNCIL	Corporation
DOCUMENT NUMBER: N/800000	323		· .
The enclosed Articles of Amendment and fee are submittee	for filing.		جنہ جنہ
Please return all correspondence concerning this matter to t	he following:		100
LAIZ	A · Rodri	guis	AFTA BOLLOW
(Nan	ne of Contact Person)	_	ST. 72
Brazil 1	Imerica (Corenci/	
•	, J		e∌s =
111 Nor	th Ovan	nge Ave	Suite 800
	(Address)	0	
Orkan	do FL 3	3280/	
(City	/ State and Zip Code)	· · ·	
E-mail address: (to be used for f	i Gues @ braz	zilusa - 00 g	
For further information concerning this matter, please call:			
(Name of Contact Person)	at	407 400	,4900
(Name of Contact Person)	(Area	a Code) (Daytime T	elephone Number)
Enclosed is a check for the following amount made payable	to the Florida Departi	ment of State:	
·	3.75 Filing Fee & rtified Copy dditional copy is closed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address	Street Ac	<u>ddress</u>	
Amendment Section	Amendme	ent Section	
Division of Corporations		of Corporations	
P.O. Box 6327	Clifton B		
Tallahassee, FL 32314	2661 Exe	ecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles of Incorporation
Brazil America Council Corporation (Name of Corporation as currently filed with the Florida Dept. of State)
(Name of Corporation as currently filed with the Florida Dept. of State)
N/8000000323 (Document Number of Corporation (if known)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006. Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name
B. Enter new principal office address, if applicable: /// North Orange Are Suik 600 (Principal office address MUST BE A STREET ADDRESS) Or and FL 32801
Grando H 3280]
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: NC/SON RAMOS Jr
5668 International Dr Orlando FC 32819
(Florida street address) New Registered Office Address:
Orlando Florida 32819 (City) (Zip Code)
(City) (Etq Chae)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
Signature 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.

Example: \underline{X} .Change \underline{X} Remove \underline{X} Add	PT John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
F) Change Add Rëmove		moraes Sute 800 Orlando FC 32801
2) Change Add	Secretary Liliana	Torres Valencia 111 N. Coange A Sute 800 Dolando FC 32801
Remove 3) Change Add Y Remove	Louana	Onveira
4) Change Add		
Remove 5) Change Add		
Remove . 6) Change Add Remove		

. If amending or adding additional Art (attach additional sheets, if necessary).	(Damerica)	(3) HETE.		
(attach additional sheets, if necessary).	(Be specific)			
				
				
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The date of each amendment(s) adop date this document was signed.	tion:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depar	does not meet the applicable statutory filing requirements, this date tment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes cast for the amendmen	nt(s)
There are no members or member adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/we	re
Dated	1/2019 3/	
Signature	Jambur '	
have not been	n or vice chairman of the board, president or other officer-if direct elected, by/an incorporator – if in the hards of a receiver, trustee, on ointed fidiciary by that fiduciary)	
	LANZ POBILOWE	<u>.</u> <u>S</u>
	(Typed or printed name of person signing)	
	Kyr Siver of!	