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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BRAUSA - BRAZI	LIAN AMERICANCO		C 	
N22000004401				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are sub	omitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
RICARDO RODRIGUEZ				
	(Name of Contact Per	rson)		
	(Firm/ Company	<u>. </u>		
	(Time Company	,		
9970 RAMBLEWOOD DRIVE				<u>-</u>
	(Address)			
CORAL SPRINGS, FL 33071				
	(City/ State and Zip (Code)		
REA1520@BELLSOUTH.NET				
E-mail address: (to be us	ed for future annual rep	ort notification	i)	. 2
For further information concerning this matter, pleas	se call:)??? • TP
RICARDO RODRIGUEZ	at	954	425.2775	phone Number)
(Name of Contact Perso	on)	(Area Code)	(Daytime Tele	phone Number)
Enclosed is a check for the following amount made	payable to the Florida l	Department of	State:	: <u>></u>
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	☐ S43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)	<u>3</u>
Mailing Address Amendment Section	Ar	reet Address nendment Sect		

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

BRAUSA - BRAZILIAN AMERICANCOALITION, INC

(Name of Corporation as currently filed with the Florid N22000004401	ia Dept. of State)		
(Document Nu	umber of Corporation (if	known)	
Pursuant to the provisions of section 617,1006, Florida Stramendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not I</i>	For Profit Corporation adopts the	e following
A. If amending name, enter the new name of the corpo	<u>ration:</u>		
N/A			The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporat	ed" or the abbreviation "Corp."	
B. Enter new principal office address, if applicable:	N/A		
Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SS</u>)		
		· · · · · · · · · · · · · · · · · · ·	
			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		
		-	
			_
			20 <u>P</u> 2
D. If amending the registered agent and/or registered of	office address in Florid	a, enter the name of the	
new registered agent and/or the new registered offic	<u>:e address:</u>		: 67
Name of New Registered Agent: N/A	·	······································	·
			10 10
New Registered Office Address:	(Florida street address)	
			S
	(City)	Florida (Zip Code)	
Van Danistan I. 1. 12.69		(inp daily	
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	red Agent: I familiar with and accep	ot the obligations of the position.	
	Signature of Man. D.	stered 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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	ones .	
Type of Action (Check One)	_Title	<u>Name</u>	Address
l) Change Add	TREA	MARCILIO ROCHA	1100 S POWERLINE ROAD DEERFIELD BEACH, FL 33442
xxxx Remove			
2) Change Add	TREA	DANIEL FOGANHOLI	1100 S POWERLINE ROAD DEERFIELD BEACH, FL 33442
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	
N/A			

N/A	
·	
	<u> </u>
بىلىر	
The date of each amendment(s) adoption:	
The date of each amendment(s) adoption: MAYI2ND, 2022	, if other than the
date this document was signed.	
$M \times V / 2 \text{ND} = 2022 \qquad \qquad A$	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the	is date will not be listed as the
document's effective date on the Department of State's records.	and the second s

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were
adopted by the board of directors.
Signature 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)
other court appointed reductary by that reductary)
LEIDMAR LOPES
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)