P00000 110023

(Re	questor's Name)	<u> </u>
(Add	dress)	
(Ada	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Doi	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RESOURCE INFO	ORMATICA INC.	
	BER: P00000110023		
	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	PALOMA MENEZES		
		Name of Contact Persor	1
	MRA ADMINILLC		
		Firm/ Company	
	1401 BRICKELL AVENUE		
		Address	
	MIAMI, FL 33131		
		City/ State and Zip Code	
D 4 L	OMA@MAGNOLAW.COM		
rati)	~	sed for future annual report	notification)
	D-mail address, (to be a	sed for fatale annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
ERICK MAGNO		305	379-4400
Name	of Contact Person	Area Co) 379-4400 de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:
	.		
□ \$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)
Mai	iling Address	Street	Address
Ame	endment Section	Amendment Section	
Division of Corporations			n of Corporations Building
P.O. Box 6327 Tallahassee, FL 32314			xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

RESOURCE INFORMATICA INC.

(Name of Corporation P00000110023	ion as currently filed with the Florida Dept of State) 2 89
	ment Number of Corporation (if known) A LANGER LEGALES
	la Statutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the co	orporation: The new
	rd "corporation," "company," or "incorporated" or the abbreviation of "Inc," or "Co". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADI</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the
	office address.
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the position.
Sign	ature 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	FABIO BACK	
Add			
X Remove			
2) Change	VP	PAULO MIGUEL DOS ANJOS	1022 PERSIMMAN AVE
X Add			SUNNYVALE CA 94087
Remove			
3.) Change	TSD	CHRISTIANE DUTRA DE ALMEIDA	6504 SW 114TH PL
X Add			APT 8
Remove			MIAMI FL 33173
,			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
() Change			
6) Change	_		
Add			
Remove			

	(Be specific)
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, , , ,	
f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the	endment if not contained in the amendment itself:
provisions for implementing the ame	
(if not applicable, indicate N/A)	

The date of each amendment(s) addate this document was signed.	doption:, it other man the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were addaction was not required.	opted by the board of directors without shareholder action and shareholder
action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 89/6	96/2019
Signature	
(By _j á d selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)
	GILMAR BATISTELA
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)