UBR 2003

AMENDED

AMMENDMENT

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION [redacted]

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 AUG -8 AM 8:00

DOCUMENT # P02000092186

800021792008
08/15/03--01038--028 **26.25

1. Corporation Name

REAL MERCANTIL TRADING E COBRANCE DO BRASIL [RMTC DO BRASIL] INC

X PLEASE MAKE THE FOLLOWING CHANGES

7/25/03 01073 001 *#35.00 MRS

2. Principal Office Address	3. Mailing Office Address
2047 S.W. Mayflower Drive	PO Box 292
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PALM CITY FL	City & State: PALM CITY, FL
Zip: 34990 Country: USA	Zip: 34991 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 510423921 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Mark Andrew Cromley

Street Address (P.O. Box Number is Not Acceptable): 2047 S.W. Mayflower Drive

Suite, Apt. #, Etc.:

City: Palm City State: FL Zip Code: 34990

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Mark Andrew Cromley Date: 7/24/03
REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	REZENDA, GLAICON - DELETE	11436 Clear Creek PL	Boca Raton, FL 33428
SV	DELETE ISABELA N. REZENDE	11436 Clear Creek Place	Boca Raton, FL 33428
PD	Cromley, MArk A.	PO BOX 292	Palm CIty, FL 34991
VP	Babcock, Celia	PO BOX 292	Palm City, FL 34991
			800021792008

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Mark Andrew Cromley 7/24/03 772-221-7952
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

DEL Celia Babcock 8/12/03