## P11000000314

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200300272032

06/19/17--01012--025 \*\*35.00



JU123 E7

## COVER LETTER

COVER LETTER S TOTAL STATE OF THE STATE OF T
TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Terrasel Overseas INC.
DOCUMENT NUMBER: \$\frac{\Phi}{110000003i4}\$
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Blanca Jambano Luna
Blanca Gammano Luna  Name of Contact Person  Lunas Acounting & Takes Cong.  Firm Company
4650 West 4 avenue.
Hialead #1, 33012  City/ State and Zip Code
blan. 61@ hot mail. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Blanca Luna at 786, 237.5255
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, F1, 32314  Street Address Amendment Section Division of Corporations Clifton Building Tallahassec, F1, 32314  Street Address Amendment Section Division of Corporations Clifton Building Tallahassec, F1, 32314

## Articles of Amendment

## to Articles of Incorporation

,	of
Terrasali Overse	40 - 40 W
(Name of Cornoration as	currently filed with the Florida Dept. of State)
(Name of Corporation 43)	Currently into with the Finnia Dept. of State
(Document N	Number of Corporation (if known)
ursuant to the provisions of section 607,1006, Florida Status Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendm
. If amending name, enter the new name of the corpora	ation:
	The new
Corp.," "Inc.," or Co.," or the designation "Corp.," "In ord "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the viation "P.A."
. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>s</u> )
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered of	fice address in Florida, enter the name of the
new registered agent and/or the new registered office	<u>address:</u>
Name of New Registered Agent	
$\epsilon F$	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered	d Agent
ereby accept the appointment as registered agent. I am fo	familiar with and accept the obligations of the position.
Signature i	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: <u>X</u> Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s
1) Change	P	Isaac	Hendy Mezras	e 1680 Hichigan au Suite 1024 Miano
<u></u> ✓ Add			•	Suite 1024 Miani
Remove				Berch . Fl. 33139
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(3) 277	

The date of each amendment(s) adopt date this document was signed.	ion: 06/09/17	, if other than th
••	06/04/17.	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, thi ment of State's records.	s date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes east for the amendment for approval.	ent(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting groups. The following state h voting group entitled to vote separately on the amendment(s):	lemeni
"The number of votes east for t	he amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareh	older
action was not required.	by the incorporators without shareholder action and shareholder	
Dated	6/09/17	
Signature	or, president or other officer – if directors or officers have not be an incorporator – if in the hands of a receiver, trustee, or other officers.	rector
(By a direct	or, presiden or other officer - if directors or officers have not be	een
selected, by appointed fi	an incorporator – if in the hands of a receiver, trustee, or other ciduciary by that fiduciary)	rourt
(	Bulley Eintrepreneurs Coys . He (Typed or printed name of person signing)	ldurs.
	Director	
<del>1</del>	(Title of person signing)	