P1400055789

(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



900319753799

10/17/18-+01047-+015 **43.75

2018 OCT 16 PM 12: 43
SECRETARY OF STATE

OCT 2 5 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: FLORESTAL USA	A CORP	
DOCUMENT NUN	IBER: P14000055789		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	HUGO LINS		
	GIMP ACCOUNTING	Name of Contact Person	1
		Firm/ Company	
	3595 SIMMS STREET		
	HOLLYWOOD, FL 33021	Address	
		City/ State and Zip Cod	<u> </u>
իսջ	otlins@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
HUGO LINS		at (447-1830
Name	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)
Ai Di P.	ailing Address nendment Section vision of Corporations O. Box 6327 dlahassee, FL 32314	Ameno Divisio Cliftor 2661 F	Address Innent Section on of Corporations a Building Executive Center Circle assee, F1, 32301

Articles of Amendment to Articles of Incorporation of

FILE

2018 OCT 16 PM

FLORESTAL USA CORP

Dept. of State) SCOREMARY OF TALL AHASS on adopts the following amendment The new corporated or the abbreviation reporation name must contain the ename of the
The new corporated or the abbreviation reporation name must contain the
The new corporated" or the abbreviation poration name must contain the
corporated" or the abbreviation reporation name must contain the
corporated" or the abbreviation reporation name must contain the
rporation name must contain the
e name of the
e name of the
e name of the
name of the
name of the
name of the
name of the
name of the
Florida
(Zip Code)
Florida

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chie Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officheld. 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 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 Chang-Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X 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>	<u>Name</u>	<u>Addres</u> s
1) Change	VPSD	ANTONIO CLAUDIR WEIAND	3389 SHERIDAN STREET
Add	<u></u> .		STE 429
X Remove			HOLLYWOOD, FL 33021
2) Change			
Add			
Remove			
3)Change		-	
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

	ets, if necessary).	(Be specific)			
		<u> </u>			
					
_,					
					•
<u> </u>			<u> </u>		
					· · · · · · · · · · · · · · · · · · ·
			-		
				· · ·	
		····			
			 		
				ITIAM AT ICCHAM CHUI	
an amendment pr	ovides for an exc	hange, reclassific	<u>cation, or cancella</u>	Hon or issued sum	<u>es,</u>
provisions for impl	ementing the am	hange, reclassific endment if not co	cation, or cancells ontained in the an	nendment itself:	<u>'es,</u>
provisions for impl	ovides for an exc ementing the am le, indicate N/A)	change, reclassific endment if not co	cation, or cancells ontained in the an	nendment itself:	es,
provisions for impl	ementing the am	change, reclassificendment if not co	cation, or cancells ontained in the an	nendment itself:	<u>'es,</u>
provisions for impl	ementing the am	change, reclassifi endment if not co	cation, or cancells ontained in the an	nendment itself:	······
provisions for impl	ementing the am	change, reclassificendment if not co	cation, or cancells ontained in the an	nendment itself:	······································
provisions for impl	ementing the am	change, reclassificendment if not co	cation, or cancells ontained in the an	nendment itself:	·····
provisions for impl	ementing the am	change, reclassificendment if not co	cation, or cancells ontained in the an	nendment itself:	·····
provisions for impl	ementing the am	change, reclassificendment if not co	cation, or cancells ontained in the an	nendment itself:	<u>'es,</u>
provisions for impl	ementing the am	change, reclassific endment if not co	cation, or cancells	nendment itself:	······································
provisions for impl	ementing the am	change, reclassific endment if not co	cation, or cancells	nendment itself:	<u>'es,</u>
provisions for impl	ementing the am	change, reclassific endment if not co	cation, or cancells	nendment itself:	·es.
provisions for impl	ementing the am	change, reclassificendment if not co	cation, or cancells	nendment itself:	'es,
provisions for impl	ementing the am	change, reclassificendment if not co	cation, or cancells	nendment itself:	'es,
an amendment provisions for impl (if not applicable	ementing the am	change, reclassification of control of the control	cation, or cancells	nendment itself:	·es.
provisions for impl	ementing the am	change, reclassification of control of the control	cation, or cancells	nendment itself:	'es,

10/05/2018	if other than th
The date of each amendment(s) adoption:, date this document was signed.	II outer man u
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, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
10/05/2018	
Dated	
Signature	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
MAURICIO LAMPERT WEIAND	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	