

P 15000001491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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10/17/17--01025--011 **35.00

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2017 NOV 13 PM 12:11

C. GOLDEN

NOV 14 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

FERRARO BUSINESS CONSULTING CORPORATION
NAME OF CORPORATION: _____
P15000001491
DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CLEITON CARDOSO

Name of Contact Person
DOMINIUM CONSULTING SERVICES, LLC

Firm/ Company
6965 PIAZZA GRANDE AVE , SUITE 206

Address
ORLANDO - FL - 32835

City/ State and Zip Code
info@dominiumcs.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEONARDO FIGUEIREDO 407 374.2329

Name of Contact Person at () Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 18, 2017

CLEITON CARDOSO
6965 PIAZZA GRANDE AVENUE
SUITE 206
ORLANDO, FL 32835

SUBJECT: FERRARO BUSINESS CONSULTING CORPORATION
Ref. Number: P15000001491

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You can check only one (1) box regarding the adoption of amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 117A00021068

RECEIVED
17 NOV 13 PM 4:31
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

FILED

FERRARO BUSINESS CONSULTING CORPORATION

2017 NOV 13 PM 12:11

(Name of Corporation as currently filed with the Florida Dept. of State)

P15000001491

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2295 S.HIAWASSEE ROAD , SUITE 202

ORLANDO - FL - 32835

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered 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 Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	PTD	PAULO E. FERRARO	AV.ROUXINOL, 533 APT 211
<input type="checkbox"/> Add			SAO PAULO - SP BRAZIL
<input type="checkbox"/> Remove			CEP: 04516-000
2) <input checked="" type="checkbox"/> Change	V	ELIETE J FERRARO	AV.ROUXINOL, 533 APT 211
<input type="checkbox"/> Add			SAO PAULO - SP BRAZIL
<input type="checkbox"/> Remove			CEP: 04516-000
3) <input checked="" type="checkbox"/> Change	CFO	DIANDRA MAYNNE J FERRARO	AV.ROUXINOL, 533 APT 211
<input type="checkbox"/> Add			SAO PAULO - SP BRAZIL
<input type="checkbox"/> Remove			CEP: 04516-000
4) <input checked="" type="checkbox"/> Change	CFO	DANDARA Melinna J FERRANO	AV.ROUXINOL, 533 APT 211
<input type="checkbox"/> Add			SAO PAULO - SP BRAZIL
<input type="checkbox"/> Remove			CEP: 04516-000
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: _____, if other than the date this document was signed, 10/09/2017

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 be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ 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)"

☐ 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.

10/09/2017

Dated _____

DocuSigned by:
Signature PAULO FERRARO

(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)

PAULO J FERRARO

(Typed or printed name of person signing)
DIRECTOR / PRESIDENT

(Title of person signing)