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	Division of Cor	rporations		Ξ.	D .3	
	Fax Number	: (850)617-6380			1302	
From:					Ϋ́Η	
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	Email Address:	Customer @	abikcorp.com			

COR AMND/RESTATE/CORRECT OR O/D RESIGN UCHOA CORP

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Help

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					<u>COVER LET</u>	<u>ter</u>		
	TO: Amendment Section Division of Corporations							
	NAME OF CORPORATION: UCHOA CORP DOCUMENT NUMBER: P15000061510							
	The en	closed Articles	of Amer	<i>idment</i> and fee are	e submitted for filing.			
	Please return all correspondence concerning this matter to the following:							
			STEPH.	ANIE CASTRO				
					Name of Contact	t Person		
	:		ACCOL	JNT BOOKKEEP	Firm/ Comp	anv		
			5301 CO	ONTOY RD, STE	-			
					Address			
				NDO, FL 32811	City/ State and Z	lip Code		
			CUSTO	MER@ABKCOR	Р.СОМ			
				MER@ABKCOR nail address: (to b	P.COM e used for future annual	l report noti	fication)	
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	Articles of Amendment
	to
1	Articles of Incorporation
i	of
	UCHOA CORP
	(Name of Corporation as currently filed with the Florida Dept. of State)
	P15000061510
	(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. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	2021	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MAY 25	
	FM 3: 29	C

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

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

John Doe

РТ

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

<u>X</u> Change	<u> 14</u>	John Doe	
X Remove	<u>v</u>	<u>Mike Jones</u>	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change	MGR	Glaucio Cavalcante Uchoa	1986 WESTPOINTE CIRCLE
X Add			ORLANDO, FL 32835
Remove			
2) Change			
Add			
Remove		<u></u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

<u>.</u>
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)

Page:	7 05/25/2021 11:38 AM TO:18506176380 FROM:5612934213	I
	The date of each amendment(s) adoption:, if ot	her than the
	Effective date <u>if applicable</u> :	
	effective date <u>if applicable</u> : (no more than 90 days after omendment file date)	_
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	isted as the
	Adoption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sharehol action was not required.	der
	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 shateholders 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 (voling group)	
	(voung group)	
-	MAY 21, 2021 Dated	
	Signature <u>Signature</u> <u>(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)</u>	
	EDIZIA UCHOA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	-
		ZII TAL
		HA
		SEURE ARY OF TALLAHASSEE, F
		r stale FLONE

2021 MAY 25 PH 3: 29 LUKE LARY OF STATE LLAHASSEE, FLORIDA FILED

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