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(Ad	ldress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Latin American Tr	aders USA, Corp			
DOCUMENT NUM	D15000070500	· <u>-</u>			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	tter to the following:			
	Nayarit Briceno				
	Name of Contact Person				
	BW&T Business Advisers, Inc				
	Firm/ Company				
	3600 Red Road Suite 301				
	Address				
	Miramar, Fl. 33025				
ĭ		City/ State and Zip Code	e		
l odn					
adn	nin@accountingbwtba.com	16.6.			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat	ion concerning this matter, pleas	se call:			
Nayarit Briceno		at (<u>954</u>	443-1594		
Name of Contact Person		Area Co	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)		
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

LATIN AMERICAN TRADERS USA, CORF	, 			
(Name of Co	rporation as currently	y filed with the Florida Dep	t. of State)	
P15000070588				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this	Florida Profit Corporation a	dopts the following	ng amendment(s)
A. If amending name, enter the new name o	of the corporation:			
				_The new
name must be distinguishable and contain is "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "	Co". A professional corpor		
B. Enter new principal office address, if ap (Principal office address MUST BE A STREE				
C. Enter new mailing address, if applicable				
(Mailing address <u>MAY BE A POST OFF)</u>	(CE BOX)			
D. If amending the registered agent and/or			me of the	
new registered agent and/or the new reg	istered office address			
Name of New Registered Agent				_
				_
	(Florida str	eet address)		
New Registered Office Address:			_, Florida	
		(City)	(Zip	Code)
N Paristand Ass. (2.6)				
New Registered Agent's Signature, if chang I hereby accept the appointment as registered			ns of the position	_
		und under mit songumen	EC	υ ι «
				#
			- C	<u> - = </u>
	Signature of New R	egistered Agent, if changing	ATO	

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 <math>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>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	Address
1) Change	D	JUAN JOSE TAMAYO	8395 NW 113 PATH
X Add			DORAL, FL. 33178
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	rticles, enter change(s) here:). (Be specific)
provisions for implementing the am	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

The date of each amendment(s) at date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	clock does not meet the applicable statutory filing requirements, this date very partment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(a) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.	
	proved by the shareholders through voting groups. The following statement 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	
ъу	, n	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
08/27/15 Dated		
Signature	Al	·
(By a d selecte	irector, president or other officer - if directors or officers have not been ind, by an incorporator - if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)	
	JOSE AZUAJE	
	(Typed or printed name of person signing)	
	(Title of person signing)	
	(Title of person signing)	