P15000097072

(Requestor's Name)	
	Address)	
(Address)	
	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
(Document Number)	
Certified Copies	Certificates of	Status
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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv^o

ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 6/18/2021

850-245-6051

PRIORITY Regular Approval

OUR REF # (Order ID#) 929092

ORDER ENTITY
LH TRADING INC.

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LH TRADING INC. (FL)

File the attached amendment

NOTES:

\$35.00 Authorized

Email address for annual report reminders; cosec@tmf-group.com-

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, June 18, 2021 Page 1 of 1

Articles of Amendment to Articles of Incorporation of

LH TRADING INC.

	bit Italiano inc.
(Name of Corporatio	n as currently filed with the Florida Dept. of State)
	P15000097072
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	rporation:
HOLCIM TRADING INC.	The new
	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
-	(Florida street address)
Nov. Project of Office Address.	
New Registered Office Address:	(City) , Florida (Zip Code)
	am familiar with and accept the obligations of the position.
Signa	ture 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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>De</u>								
X Remove	<u>v</u>	Mike Jo	ike Jones								
X Add	<u>\$V</u>	Sally St	mith_								
Type of Action (Check One)	Title		Name	<u>Addres</u> s							
1) Change		_									
Add											
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).	(Be specific)	CTC.		
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£		an annuallation of in	used aboute	
f an amendment provides for an exci provisions for implementing the ame	nange, reclassification, andment if not contain	ed in the amendmen	titself:	
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

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The date of each amendment(s) adoption: date this document was signed.	, if other than the
date tills document was signed.	
Effective date if applicable:	1.001
(no	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not me document's effective date on the Department of State	et the applicable statutory filing requirements, this date will not be listed as the s records.
Adoption of Amendment(s) (CHECK	ONE)
The amendment(s) was/were adopted by the incoraction was not required.	orators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	nolders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shar must be separately provided for each voting group	cholders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes cast for the amendme	t(s) was/were sufficient for approval
by	
(voting gi	oup)
18 / 06 / 2021	
Dated	Fred .
(By a director, president	or other officer – if directors or officers have not been tor – if in the hands of a receiver, trustee, or other court at fiduciary)
Céline da Costa Co	imbra Ricardo Ripalda
(Туре	d or printed name of person signing)
President	Director
(Title	of person signing)

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