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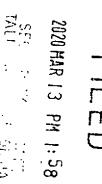
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: ALPHA BUSINES	S, CORP.				
DOCUMENT NUMBI	D17000070740					
The enclosed Articles of	f Amendment and fee are sub	omitted for filing.				
Please return all corresp	ondence concerning this mat	ter to the following:				
F	Peterson Da Silva De Oliveira	ı				
_		Name of Contact Person				
ž	ALPHA BUSINESS, CORP					
_		Firm/ Company				
6	554 LOCK ROAD					
-		Address				
Ī	DEERFIELD BEACH, FL 33	442	<u> </u>			
•		City/ State and Zip Code	•			
ī	oeterson.alphacorp@gmail.co	m				
-	E-mail address: (to be us	ed for future annual report	notification)			
For further information concerning this matter, please call:						
Peterson Da Silva De Oliveira		at (
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Divisio The Co 2415 ?	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of

ALPHA BUSINESS CORP

ALPHA BUSINESS CORP			D 654-1->		
(Name of Corporation a	s currently filed	with the Florida	Dept. of State)		
P16000079749					
(Document	Number of Corp	oration (if known)			
Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:	itutes, this <i>Florid</i>	a Profit Corporatio	on adopts the follo	wing amendm	ient(s) (
A. If amending name, enter the new name of the corpo	<u>oration:</u>				
				The ne	w'
name must be distinguishable and contain the word "corpo- "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviate	- "Co". A profe	ny," or "incorpora essional corporation	ted" or the abbrev on name must co	riation "Corp., ntain the wor	 ·d
B. Enter new principal office address, if applicable:	_				
(Principal office address MUST BE A STREET ADDRE.	<u>'SS</u>)				
		-			
	_	,			
C. Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)			···		
				70 -	-11
				<u> </u>	i
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.		Florida, enter the	e name of the	PH	יוו
			``. ē^	-	J
Name of New Registered Agent		-		` & `	
	(Florida street ada	days a			
	(rioriaa sireet daa	iress)			
New Registered Office Address:	(City)		, Florida	(Zip Code)	
	(CIŅ)		1	z.ip Coue)	
New Registered Agent's Signature, if changing Registe	red Agent:				
Thereby accept the appointment as registered agent. I an	n familiar with ar	nd accept the oblige	ations of the positi	ion.	
Signature	e of New Registe	red Agent, if chang	ing		

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:

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>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally St	mith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	P		Peterson E. Da Silva De Oliveira	654 Lock Rd.
Add				Deerfield Beach, FL 33442
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

amending or adding additional Artitach additional sheets, if necessary).	(Be specific)				
			-	<u>.</u>	
				<u>.</u> .	
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an amendment provides for an exc	hange, reclassific	ation, or canc	ellation of issue	ed shares,	
rovisions for implementing the ame	endment if not co	ntained in the	amendment it	self:	
(if not applicable, indicate N/A)					
		<u></u>		1.00	<u> </u>
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-					

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	ock does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendn fficient for approval.	nent(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following stee each voting group entitled to vote separately on the amendment(s):	Hement
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selecte	2/2020 rector, president or other officer – if directors or officers have not be to the diduction of the section of the secti	
	Peterson E. Da Silva De Oliveira	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	