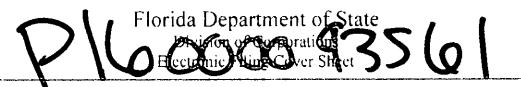
10/20/21, 11:44 AM

Division of Corporations



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(((H21000390932 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ICONNECT SOLUTIONS CORP

Account Number : I20190000122 Phone : (407)863-0096 Fax Number : (407)612-2181

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| Email | Address | | | |
|-------|---------|--|--|--|
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COR AMND/RESTATE/CORRECT OR O/D RESIGN LEAO SERVICES GROUP CORP

| Certificate of Status | 0 |
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| | | COVER LETTER | | 1210003909323 |
|---|----------------------------|-----------------------|-----------------------|---------------|
| TO: Amendment Section Division of Corporations | | | | |
| NAME OF CORPORATION: | LEAO SERVICES GRO | OUP CORP | | |
| DOCUMENT NUMBER: P160 | | | | |
| The enclosed Articles of Amenda | nent and fee are submitte | ed for filing. | | |
| Please return all correspondence | concerning this matter to | the following: | | |
| EMERSO. | N CORREA | | | |
| | No | ame of Contact Perso | on . | |
| ICONNEC | T SOLUTIONS CORP | | | |
| _ | | Firm/ Company | | |
| 6735 CON | ROY ROAD STE 309 | | | |
| | | Address | | |
| ORLAND | O, FL 32835 | | | |
| | Ci | ty/ State and Zip Co | de | |
| CONTAC | T@ICONNECTSC.COM | 1 | | |
| E-ma | l address: (to be used fo | r future annual repor | rt notification) | |
| For further information concerning | ng this matter, please cal | l : | | |
| EMERSON CORREA | | 407 at (| 863 0096 | |
| Name of Contact | Person | | ode & Daytime Telepho | one Number |

Mailing Address

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

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Talfahassee, FL 32303

Check if applicable

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

From: EMERSON CORREA

Articles of Amendment to Articles of Incorporation of

H21000390932 3

| f Corporation as currently filed with the Flo | orida Dept. of State) |
|--|---|
| | |
| (Document Number of Corporation (if kn | own) |
| 1006. Florida Statutes, this <i>Florida Profit Corp</i> | poration adopts the following amendment(s |
| ame of the corporation: | |
| | 771 |
| corp." "Inc." or "Co". A professional corp. or the abbreviation "P.A." if applicable: TREET ADDRESS) cable: OFFICE BOX) | poration name must contain the proof of the |
| | er the name of the |
| ICONNECT SOLUTIONS CORP | |
| 6735 CONROY ROAD STE 309 | |
| | |
| ORLANDO | . Florida 32835 |
| (City) | (Zip Code) |
| hanging Registered Agent: ered agent. I am familiar with and accept the | obligations of the position. |
| Signature of New Registered Agent, if | VINDO A |
| | (Document Number of Corporation (if kn 1006. Florida Statutes, this Florida Profit Corporation: The word "corporation." "company," or "incolorp," "Inc," or "Co". A professional corp or the abbreviation "P.A." if applicable: TREET ADDRESS) icable: OFFICE BOX) icable: CONNECT SOLUTIONS CORP 6735 CONROY ROAD STE 309 (Florida street address) ORLANDO |

Page: 4 of 6 2021-10-22 17:41:52 GMT 14076122181 From: EMERSON CORREA

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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 Offleer 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 Doc | |
|---|-------------------|--|---|
| X Remove | \underline{V} | Mike Jones | |
| X Add | <u>SY</u> | Sally Smith | |
| Type of Action (Check One) 1) _X Change Add Remove | <u>Title</u> V | Name LEAO GROUP CONSULTORIA DE NEGOCIOS LTDA - EPP | Address AV JOSE SILVA DE AZEVEDO NETO 200 BL 002 SALA 0202, BARRA DA TIJUCA RIO DE JANEIRO, 22.775-056 |
| 2) Change Add | | | |
| Remove Change Add | | | |
| Remove 4) Change Add | - | | |
| Remove 5) Change Add | | | |
| Remove 6) Change Add | | | |
| Remove | | | |

Page: 5 of 6

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | H21000390932 3 |
|---|--|
| CHANGING REGISTERED AGENT | |
| CHANGING MEMBER TITLE AND ADDRESS | |
| | |
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| | |
| ************************************** | |
| F. If an amendment provides for an exchange, reclassification, or can provisions for implementing the amendment if not contained in the (if not applicable, indicate N/A) | cellation of issued shares. c amendment itself: |
| | |
| | |
| | |
| | |
| | |
| | · |
| | |

From: EMERSON CORREA

H21000390932 3

| The date of each amendment(s) adoption: |
|--|
| 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 incorporators, or board of directors without shareholder action and shareholder action was not required. |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east for the amendment(s) was/were sufficient for approval |
| by |
| (voting group) |
| Dated OCTOBER 19, 2021 Signature Legintrato Situa Lego |
| (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) |
| LEONARDO S LEAO |
| (Typed or printed name of person signing) |
| PRESIDENT |
| (Title of person signing) |