## P1700018341

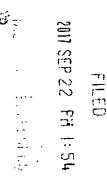
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C. GOLDEN SEP 2 5 2017

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: MIAMI BRAZIL:	SOCCER CORP		
DOCUMENT NUMI				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	itter to the following:		
	MARCO REIS			
		Name of Contact Person	1)	
	USA TAX CORPORATION			
		Firm/ Company		
	591 E SAMPLE RD			
		Address		
	POMPANO BEACH FL 330	064		
		City/ State and Zip Cod	· · · · · · · · · · · · · · · · · · ·	
USA*	FAX@USATAXFL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
MARCO REIS		954 at (	788-1818	
Name o	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Section Division of Corporations		
P.O. Box 6327		Clifton Building		
Lall	ahassee, FL 32314	2661 E	xecutive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to

## Articles of Incorporation of

FILED

MIAMI BRAZIL SOCCER CORP

2017 SEP 22 PM 1:54

(Name of Corporation as currently	filed with the Florida Dept. of State)
P17000018241	្សារ ខេត្តការមេម៉ាក់។
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "C word "chartered," "professional association," or the abbreviation "I	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	-
(Florida stre	et 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 w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing

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 Doc 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 D	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	T		FRANCISCO SALES JUNIOR	3450 NW 85TH CT SUITE 338
XAdd				DORAL, FL 33122-1948
Remove				
2) Change		_		
Add				
Remove				
3 ) Change	<u></u>	-		w
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
б) Change				
Add				
Remove				

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)			
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f an amendment provides for an excl	hange, reclassifica	tion, or cancellati	ion of issued share	<u>'S</u> ,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not con	<u>itained in the ame</u>	ndment itself:	
		<del>.</del>		
		<del>.</del>		

The date of each amendment(s	(97) 872017 (a) adoption:	, if other than the
date this document was signed.		
·     ( _   Effective date <u>if applicable</u> : <u> </u>	9/18/2017	
Effective date <u>if appreasive</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendmen e sufficient for approval.	t(s)
	approved by the shareholders through voting groups. The following states for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
09/18/2	017	
Dated Signature	Shux 1	
selo	a director, president or other officer – if directors or officers have not bee ected, by an incorporator – if in the hands of a receiver, trustee, or other co ointed fiduciary by that fiduciary)	
	GUILHERME DE SOUZA PESSOA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u> </u>