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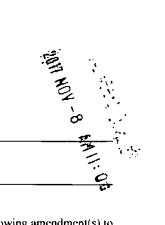
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AUEIZ ENTERPH	CORP			
DOCUMENT NUM	BER: P17000042478				
The enclosed Articles	of Amendment and fee are su	bmitted for fil	ing.		
Please return all corre	spondence concerning this ma	tter to the follo	owing:		
	RENATO EUGENIO				
		Name of C	ontact Person	n	
	DPRG ENTERPRISE CORP				
	Firm/ Company				
	8424 COVENTRY PARK W	/AY			
		Ac	ldress		
	WINDERMERE, FL 34786				
		City/ State	and Zip Cod	e	
. 9119	INESSFACTORYUSA@GM	AII COM			
	E-mail address: (to be us		naval popuet	notification)	
	1man address. (to be di	sea for fatare a	ишан терект	notification)	
For further information	on concerning this matter, pleas	se call:			
RENATO EUGENIO	at	407	965-9349		
Name	of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the	Florida Depa	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 F Certified (Addition enclosed	Copy al copy is	□\$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			
	· · · · · · · · · · · · · · · · · ·				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



AUEIZ ENTERPRISE CORP

(Name	of Corporation as currently fi	iled with the Florida Dept. of State)	3
P17000042478			31.0
· · · · · · · · · · · · · · · · · · ·	(Document Number of Co	orporation (if known)	Ei
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flo</i>	orida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
	nation "Corp," "Inc," or "Co	"company," or "incorporated" or the abb ". A professional corporation name must co	
B. Enter new principal office address,	if applicable:		
(Principal office address MUST BE A S			
-			
. C. Enter new mailing address, if appli	icable:		
(Mailing address MAY BE A POST			
•			
			
			
D. If amending the registered agent an	d/or registered office address	in Florida, enter the name of the	
new registered agent and/or the ne	w registered office address:		
Name of New Registered Agent	DO AMARAL CAVALCAN	TI, IGOR	
	8424 COVENTRY PARK W	AY	
	(Florida street	address)	
	WINDERMERE	34786	
New Registered Office Address:	(Ci	ry, Florida (Zip Co	ndet
	101	(2.4)	A.(.)
New Registered Agent's Signature, if c	hanging Registered Agent:		
		n and accept the obligations of the position.	
	TEAL AHMI	970	
	Signature M Now Dan	istered Agent, if changing	
	organity e of new nega	метеи ледет, у спануту	

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	DA S AUEIZ, JOAO EDUARDO	8424 COVENTRY PARKWAY
Add			WINDERMERE, FL 34786
X Remove			
2) Change	VP	LOURENCO AUEIZ, LIANE L	8424 COVENTRY PARKWAY
Add			WINDERMERE, FL 34786
X Remove			
3) Change	P	DO AMARAL CAVALCANTI, 1GO	8424 COVENTRY PARKWAY
X Add			WINDERMERE, FL 34786
Remove			
4) Change		 	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)		onal sheets, if necessary). (Be specific)
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		
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	11/01/2017	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
11	1/01/2017	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	sst for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	idopted by the incorporators without shareholder action and shareholder	
11/01/20 Dated	017	
Signature	All Az	
	a director, president or other officer - if directors or officers have not been	
	ated, by an incorporator - if in the hands of a receiver, trustee, or other court	
	pinted fiduciary by that fiduciary)	
	DA SILVEIRA AUEIZ, JOAO EDUARDO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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