P17 0000 50613

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OCT 14 2009 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CANAL CONTAI	NER INC	
	ER:		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
ı	RUBEN ZURGA		
-		Name of Contact Person)
,	MIAMI ACCOUNTING & T	TAX SERVICES LLC	
		Firm/ Company	-
	15805 BISCAYNE BLVD S	TE 103	
		Address	
	AVENTURA, FL 33160		
-		City State and Zip Code	e
-	gmatax.com E-mail address: (to be use concerning this matter, please		notification)
RUBEN ZURGA		786	657-2521
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
S35 Filling Fee	□S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amei Divis P.O.	ing Address indment Section inon of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clitton 2661 E	Address Iment Section on of Corporations (Building Executive Center Circle 1880c, F1 32301

Articles of Amendment to Articles of Incorporation of

CANAL CONTAINER INC			
(<u>Name</u>	of Corporation as currer	ntly filed with the Florida Dept. of State)	
P17000050613			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation adopts the fo	flowing amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
			The new
	uation "Corp," "Inc," or	ion," "company," or "incorporated" or "Co". A professional corporation name to "P.A."	
R. Enter new principal office address	if applicable:	15805 BISCAYNE BLVD STE 103	
	B. Enter new principal office address, if applicable; [Principal office address MUST BE A STREET ADDRESS]		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		15805 BISCAYNE BLVD STE 103	27
(Staning duaress <u>SIAT BI: A POST OFFICE BOX</u>)		AVENTURA, FL 33160	
			7: 07
D. If amending the registered agent an new registered agent and/or the ne			ŕ
Name of New Registered Agent	MIAMI ACCOUNTING	& TAX SERVICES LLC	
	105805 BISCAYNE BL	VD STE 103	
	tFlorida s	street address)	
New Registered Office Address:	AVENTURA , Florida		160
		(City)	(Zip Code)
New Registered Agent's Signature, if e	hanging Registered Ager	nt:	
		r with and accept the obligations of the pos	ition.
		- <i>L</i>	
	Signature of New	Registered 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 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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>Y</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	PESTANA, CASSIUS REGIS	2000 N BAYSHORE DR #607
XAdd			MIAMI, Ft. 33137
Remove			
2) Change	VP	CARRASCO SARAYA, MATHEUS	RUA PROFESSOR DOUTOR ARAUJO, 1758
X Add	•		PELOTAS, RIO GRANDE DO SUL, BRAZIL 96020-360
Remove			
3) Change			
Add			
Remove			·· · · · · · · ·
4) Change	· -		
Add			
Remove			
5) Change			- · · · · · · · · · · · · · · · · · · ·
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Artic Attach additional sheets, (f necessary),	(Be specific)
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, indment if not contained in the amendment itself:
(if not applicable, indicate N/4)	

The date of each amendment(s) ado date this document was signed.	ption:, if other than the
09/24/	2019
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.
	oved by the shareholders through voting groups. The following statement sich voting group entitled to vote separately on the amendment(s):
"The number of votes east fo	t the amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder
09,24/2019 Dated	
Signature	
(By a dire selected,	etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)
C	ristiano Lopes
	(Typed or printed name of person signing)
Pı	resident
	(Title at person signing)