P17000052193

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NOVO MUNDO	ENTERPRISE CORPORA	I'ION
DOCUMENT NUMBER: P17000052193		**************************************
The enclosed Articles of Amendment and fee are:	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
RENATO EUGENIO		
	Name of Contact Persor	1
DPRG ENTERPRISE COR	RP	
	Firm/ Company	
8424 COVENTRY PARK	WAY	
	Address	
WINDERMERE, FL 3478	6	
	City/ State and Zip Code	2
BUSINESSFACTORYUSA@GI	MAIL.COM	
E-mail address: (to be	used for future annual report	notification)
For further information concerning this matter, ple	ase call:	
RENATO EUGENIO	at (407	965-9349 de & Daytime Telephone Number
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount mad-	e payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$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 P.O. Box 6327 Tallahassee, Fl. 32314	Amend Divisie Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	Articles of Incorporat
	of
NOVO MUNDO ENTERPRISE CORPORATION	
(Name of Corpora	tion as currently filed w

(<u>Name o</u>	f Corporation as currently	filed with the Florida Dept.	of State)	
P17000052193			· ·	
	(Document Number of C	Corporation (if known)		<u> </u>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Fl	orida Profit Corporation add	opts the following amendmen	nt(s) to
A. If amending name, enter the new na	me of the corporation:			
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc," or "Co	o". A professional corporat		
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if applia (Mailing address MAY BE A POST of the control of the con	OFFICE BOX) d/or registered office addres	ss in Florida, enter the name	201 HOV IT AM IO: 50	FILED
new registered agent and/or the new	· 		7.	
Name of New Registered Agent	RAMOS, SANDRO G	···· - · · · · · · · · · · · · · · · ·		
	6965 PIAZZA GRANDE A	VE STE 309		
	(Florida stree	(address)		
New Registered Office Address:	ORLANDO		Florida 32835	
	(()	ity)	(Zip Code)	
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	ered agent. I am familiar wil	th and accept the obligations	of the position.	

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	RAMOS, SANDRO G	6965 PIAZZA GRANDE AVE
X Add			STE 309 - ORLANDO, FL 32835
Remove			
2) Change	P	MARCHETI FILHO, REINALDO	8300 NW 53RD ST STE 108
Add			DORAL, FL 33166
X Remove			
3) Change			
Add			
Remove			
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			-
Remove			

хизсп а	ding or adding udditional sheets	s, if necessary)	. (Be specif	ic)	-			
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f an am	nendment prov	ides for an ex	change, recla	ssification, or	cancellation (of issued share	5 ,	
provisi	ons for implem not applicable.	enting the am	<u>iendment if n</u>	<u>ot contained i</u>	n the amendn	nent itself:		
					 			
 -							· · · · · ·	 -
								

The date of each amendment(s) adop	11/13/2017	, if other than
date this document was signed.		, if other man
11/13/2	017	
Effective date if applicable:		
	(no more than 90 day	s after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Depart		statutory filing requirements, this date will not be listed a
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were suffice.		per of votes east for the amendment(s)
☐ The amendment(s) was/were approx must be separately provided for ea		oting groups. The following statement eparately on the amendment(s):
"The number of votes cast for	the amendment(s) was/were suf	icient for approval
by	(voting group)	 ,
	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors with	ut shareholder action and shareholder
The amendment(s) was/were adopte action was not required.	d by the incorporators without s	nareholder action and shareholder
· 11/13/2017 Dated		
Signature	mode.	f directors or officers have not been
	y an incorporator – if in the han fiduciary by that fiduciary)	ls of a receiver, trustee, or other court
арролпес	inductary by that inductary)	
M	ARCHETI FILHO, REINALDO	
	(Typed or printed name	of person signing)
PF	ESIDENT	
	(Title of no	son signing)