(((H20000186930 3)))

(shown below) on the top and bottom of all pages of the document.



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : COMPANY COMBO, LLC

Account Number : I20160000033 : (866)428-2030 Phone : (407)308-0481 Fax Number

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

Pero i l	Address:				
On rot + +	Work 699'				

# COR AMND/RESTATE/CORRECT OR O/D RESIGN **BELT NUTRITION, CORP**

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	BELT NUTRITION	ON, CORP	
	P17000058520		
DOCUMENT NUME	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	atter to the following:	
	KIMBERLY MESA		
	COMPANY COMBO, LLC	Name of Contact Perso	un
	2815 DIRECTORS ROW S	Firm/ Company TE 100	
	ORLANDO, FL 32809	Address	
		City/ State and Zip Coc	de
	INFO@COMPANYCOMB	O.COM	
	E-mail address: (to be u	sed for future annual repor	t notification)
For further information	n concerning this matter, plea	se call. 866 at (	4282030
Name o	of Contact Person		ode & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Dep	partment of State;
■ \$35 Filing Fee	S43.75 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)
	ling Address	Street	Address dment Section
	sion of Corporations		on of Corporations
	Box 6327	The C	entre of Tallahassee
Tall;	ahassee, FL 32314		N. Monroe Sulect, Suite 810 assee, FL 32303

### Articles of Amendment to Articles of Incorporation of

BELT NUTRITION, CORP	
P17000058520 (Name of Corporation as currently f	iled with the Florida Dept. of State)
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A J "chartered," "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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 new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
	<u> ကိုက</u> ် ကိုက်
(Florida street	address)
New Registered Office Address:	, Florida 50-1 co
(C)	ity) (inde)"
	Q. )
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wit.	h and accept the obligations of the position
The engineery we approximately a significant agents of any point of the significant agents.	Tank accept the oringerman by the production
Signature of New Regi	istered Agent, if changing
Check if applicable	

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

Example:

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	<u> 74</u>	John Doc		
X Remove	<u>V</u>	Mike Jones	er Pos	262
X Add	<u>sv</u>	Sally Smith	;;; c: <; m;;;	in, e
Type of Action (Check One)	Title	<u>Name</u>	Address SS	2020 JUN 18
1) X Change	V 	Joao Augusto Serra Fugiwara	3300 NE 188th st, apt 709	=
Add			Aventura, FL, 33180	Ğΰ
Remove				<u> </u>
2) Change				<del></del>
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				<del></del>
Add Remove				
6) Change				
Add				
Remove				

provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	TORIDS	. 8: 13: 14:
	<u></u>	

## 06/12/2020

The date of each amendment(s) ad late this document was signed.	option:		if other than th
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory fifing requirements, this department of State's records	ate will no	t be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were ado action was not required	pted by the incorporators, or board of directors without shareholder acti	on and sha	reholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(fricient for approval.	(s)	
must be separately provided for  "The number of votes cast by  Dated	roved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):  for the amendment(s) was/were sufficient for approval  (voting group)  2-2020  rector, president or other officer - if directors or officers have not been been incorporator - if in the hands of a receiver, trustee, or other couled fiduciary by that fiduciary)  RODRIGO ALEXANDRE ALVES CAMARGO  (Typed or printed name of person signing)	SECRETARY DE STATE TALLAHASSEE FLORIDA	2023 TUN 13 MM 8: 16
	(Typed or printed name of person signing) PRESIDENT		
	(Title of person signing)		