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COVER LETTER

TO: Amendment Section Division of Corporations			
7.	, L PDR INC	•	
NAME OF CORPORATION: INTERNATIONA	LIDKIIK.		
DOCUMENT NUMBER: P17000078759			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	itter to the following:		
MARCELO URAN CABRA	L		
	Name of Contact Persor		
INTERNATIONAL PDR IN	C		
	Firm/ Company	•	
1050 NE 23RD CT			
	Address		
POMPANO BEACH FL 330	064		
	City/ State and Zip Code	:	
Marcelo.uran19@hotmail.co	m		
E-mail address: (to be u	sed for future annual report	notification)	
For further information concerning this matter, plea	se call:		
Marcelo Uran	954 at (663-0170	
Name of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:	
☐ \$35 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		Address	
Amendment Section			
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

INTERNATIONAL PDR. INC.

(Name of Constant	Al. Cl. J. Cal. Ch. Ch. Ch. D. A. (C.C.A.)
P17000078759	tly filed with the Florida Dept. of State)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida 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," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1050 NE 23RD CT
(Principal office address MUST BE A STREET ADDRESS)	Pompano Beach, FL 33064
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1050 NE 23RD CT
	Pompano Beach, FL 33064
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
(Florida s	treet address)
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New	Registered Agent, if changing
Chook if applicable	

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

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 I	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u> .	<u>Jones</u>	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	·
	· · · · · · · · · · · · · · · · · · ·

The date of each date this documen	amendment(s) adoption:, if other than t was signed.
Effective date <u>if a</u>	applicable:
	(no more than 90 days after amendment file date)
Note: If the date document's effect	inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ive date on the Department of State's records.
Adoption of Ame	endment(s) (CHECK ONE)
The amendmen action was not	nt(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder required.
	nt(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) olders was/were sufficient for approval.
	nt(s) was/were approved by the shareholders through voting groups. The following statement ately provided for each voting group entitled to vote separately on the amendment(s):
"The nur	nber of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	06/1/2024 Dated
	Signature (Bora director, president or other officer – if directors or officers have not been
	selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	MARCELO URAN CABRAL
	(Typed or printed name of person signing)
	PRESIDENT

(Title of person signing)

the

the