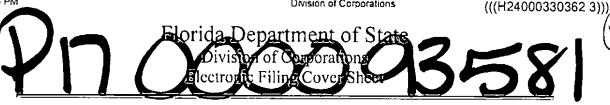
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Division of Corporations



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(((H24000330362 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : MARCELL FELIPE, P.A.

Account Number : I20110000064

Phone

: (305)381-8500

Fax Number

: (305)675-2854

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

Email Address: frontdesk@marcellfelipe.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN COMERCIO Y EXPORTACIONES CO.

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Electronic Filing Menu

Corporate Filing Menu

Help

COMERCIO Y EXPORTACIONES CO.

To: .

Articles of Amendment to 'Articles of Incorporation' of,

| (Name of Corporation as current | lly filed with th | ne Florida Dept. of S | tate) | |
|--|-----------------------|------------------------|---|-----------|
| P17000093581. | <u>-</u> | <u>=_1</u> | <u> </u> | |
| = = = (Document Number of | of Corporation | (if known) — | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation: | Florida Profit | Corporation adopts t | he following amendm | ent(s) |
| If amending name, enter the new name of the corporation: | | | | |
| ame must be distinguishable and contain the word "corporation," " | ' | | The nev | |
| Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co", chartered," "professional association," or the abbreviation "P.A. | A professional | corporation name n | aboreviation Corp., nust contain the word | đ |
| B. Enter new principal office address, if applicable: | | - | 202 SS | |
| Principal office address MUST BE A STREET ADDRESS | | _ | 20 S | |
| | | <u> </u> | | |
| | | | AH 39 | |
| ** | : | | | , <u></u> |
| Enter new mailing address, if applicable: | | | SEE 12 | • • |
| (Mailing address MAY BE A POST OFFICE BOX) | ÷ | | <u> </u> | |
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| | i | · • | 17 - 4 -4 | |
| | <u></u> | | | |
| . If amending the registered agent and/or registered office add | rece in Florida | onter the name of | ha | |
| new registered agent and/or the new registered office address | 11. | = = | <u> </u> | |
| <u></u> | 71 . | | | |
| Name of New Registered Agent | | | | |
| • | • | | | |
| - (Florida str | eet address) | | : | |
| A | • | | | |
| New Registered Office Address: | (City) | , Flori | | |
| | (City) | | (Zip Code) | |
| • | | | | |
| | | | | |
| lew Registered Agent's Signature, if changing Registered Agent, hereby accept the appointment as registered agent. Lam familiary | ith and access | the obligations of the | naeitian' | :• |
| hereby accept the appointment as registered agent. I am familiar v | min and accept | me oungulions of the | position. | - |
| - | | | | ' |
| ' ₩ | | n. | | |
| Signature of New R. | Actionary description | t if abanaire | ······································ | Ž |
| Signature of New Ki | egisierea Ageni | i, ij enanging | | ; 4 |
| heck if applicable | | | | |
| The amendment(s) is/are being filed pursuant to s. 607.0120 (11) | (c). F.S. | | | ■. |

To:

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 us an Add.

| Example: X Change | PT John Doc | | |
|-------------------------------|----------------------------|---|---|
| X Remove | <u>V</u> <u>Mike Jones</u> | • | |
| X Add | SY Sally Smith | | |
| Type of Action (Check One) | Title Name | Address | |
| 1) Change | S LARACH, MAR | JO CESAR 8420 SW 136 TERRACE | |
| نامانا | ti | PALMETTO BAY, FL 33158: | |
| X Remove | | | |
| 2) Change | i | | |
| Add | | ; ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| Remove: | <u> </u> | | |
| Add | | | |
| Remove | ter | | |
| 4) Change | , <u></u> | ; ; | |
| Add | · | ************************************** | |
| Remove: | | , ' ; | |
| 5) Change | , <u></u> | | |
| Add | ** | | |
| Remove: | • | | |
| 6)Change | .e. <u>1</u> | | • |
| Add | •• | <u> </u> | _ |
| Remove | • | | a |

| | dding additional Art sheets, if necessary) | Be specific) " | | | | |
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| The date of each amendment(s | s) adoption: | 09/27 | 124 | | ; if other than the |
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| date this document was signed. | | | 7 - 7 | | |
| Effective date if applicable: | <u> </u> | | • " | <u> </u> | ·, |
| - | (no | more than 90 days | after amendment f | île date) | |
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| Adoption of Amendment(s) | (CHECI | K ONE) | | | - |
| The amendment(s) was/were action was not required. | adopted by the inco | rporators, or board | of directors without | t shareholder action an | d shäreholder |
| ☐ The amendment(s) was/were by the shareholders was/wer | | | per of votes cast for | the amendment(s) | |
| ☐ The amendment(s) was/were must be separately provided | | | | | |
| "The number of votes of | ast for the amendme | ent(s) was/were suff | icient for approval | | |
| by <u></u> | <u></u> | - — - | <u>. </u> | , | |
| | (voting g | гоир) —— — | | | |
| 09/27/20 Dated Signature | 024 | lsh. | - | | · |
| (By | a director, president cted, by an incorpor- pinted fiduciary by t | ator – if in the hand | | | _ |
| • | GABRIEL LAR | ACH | | ٢ | |
| æ | .(Турс | ed or printed name o | f person signing) | | |
| | PRESIDENT | • | | _ | |
| | (Title | of person signing) | | | |

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