## P17000101254

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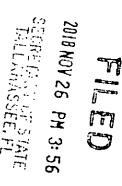
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R. WHITE NOV 3 0 2018



## COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: MONREALE ORLANDO INC DOCUMENT NUMBER: P17000101254 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: FLAVIO A NASTRINI DELGADO Name of Contact Person MONREALE ORLANDO INC Firm/ Company 6825 VISITORS CIRLCE Address ORLANDO, FL 32819 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: FLAVIO A NASTRINI DELGADO at (\_\_\_\_\_)
Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □S43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

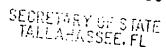
> 2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## FILED

2018 NOV 26 PM 3: 56

Articles of Amendment to Articles of Incorporation of



MONREALE ORLANDO INC	
(Name of Corporation as cur	rrently filed with the Florida Dept. of State)
P170000101254	
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporatio	ns:_
	The new
name must be distinguishable and contain the word "corpe" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," word "chartered," "professional association," or the abbrevia	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent	
(Flori	ida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	egent: iliar with and accept the obligations of the position.
Signature of N	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 Doc 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 Doc, PT us 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)	Title	<u>Name</u>	Address		
1) Change	CFO	SIMOES BENTO, FLAVIA	AV.FRANCISCO ELICERIO 144		
Add X Remove			CAMPINAS, SP 13012-100 BR		
2) Change	coo	UCHOA, RODRIGO	7021 GRAND NATIONAL DR		
Add		<del>-</del>	106		
X Remove			ORLANDO, FL 32819		
3 ) Change					
Add					
Remove					
4) Change					
Add			44		
Remove					
5) Change					
Add					
Remove					
б) Change					
Add					
Remove					

mach wanton	al sheets, if necessary).	(Be specific)			
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provisions for	nt provides for an excha implementing the amen licable, indicate N/A)	ange, reclassificat idment if not com	tion, or cancellatio tained in the amen	n of issued shares, dment itself:	
		<del></del>			<del></del>

The date of each amendment(s) adoption:	, it other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filing is document's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. To must be separately provided for each voting group entitled to vote separately on the	he following statement omendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approxi-	al
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder accion was not required.  ☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	
Dated November 14 2018	
Signature  (By a director, president or other officer – if directors or offi selected, by an incorporator – if in the hands of a receiver, to appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing	,
(Typed or printed name of person signing	)
CEO	
(Title of person signing)	