6/29/2023 13:10=00 PDT 6/29/23, 4:02 PM	To: 18507.6380 C Pager 05 Fibm: Registered Agents the Likerich of Korpbrations Florida Departurent to State Division of Corporations Electronic Filing Cover Sheet	Fax: 8134365
	Note: Please print this page and use it as a cover sheet. Type the fax audit number (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 : REGISTERED AGENTS INC.	
	From: Account Name : REGISTERED AGENTS INC Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813) 436-5206	
	Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.	
	Email Address:	
1 h : 8 i d 6,	COR AMND/RESTATE/CORRECT OR O/D RESIGN WAY ROUTES INC.	
2023 JUN 29	Certificate of Status0Certified Copy0Page Count04Estimated Charge\$35.00	
	Electronic Filing Menu Corporate Filing Menu Help	

Articles of Amendment to Articles of Incorporation of

Way Routes Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P18000007021

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc." or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:	7901 4th St N		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	STE 300		١
	St. Petersburg FL 33702	112	, "" • •
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	7901 4th St N		
	STE 300	<u>ب</u>	
	St. Petersburg FL 33702	<u> </u>	

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent (Florida street address) <u>New Registered Office Address</u>: _______, Florida_______, Florida_______, (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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 = ChiefExecutive 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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) X Change	DPST	Guilherme Ribeiro	
Add			STE 202
Remove			TAMPA FL 33614
2) Change	T	Anthony Jimenez-Dipini	7815 N DALE MABRY HWY
Add			STE 202
X Remove			STE 202
Add			
Remove			
4) Change			
Add			
5) Change			<u> </u>
Add			
Remove			
6) Change		<u> </u>	
Add			<u> </u>
Remove			

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n amendment provides for an exchange, reclassification, or cancellation of is ovisions for implementing the amendment if not contained in the amendmen	<u>ssued shares,</u> 1 <u>t itself:</u>
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	n and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	2023 JUN 29
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	· =
(voting group)	H 9:16
Dated 06/29/2023	5
Signature <u>(111)</u> (By a 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)	×
Guilherme Ribeiro	
(Typed or printed name of person signing)	
DPST	
(Title of person signing)	