P1800000 7782

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u></u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filing Officer.

Office Use Only



900347755609

07/10/20--01026 -017 *935.00

2020 JUL 10 AN 8: 58

Muchd

AUG 2 1 ZUZU I ALBRITTON

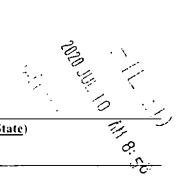
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: DIRECTLAB IMP	ORT AND SALE CORPO	RATION			
DOCUMENT NUMBI	ER: P18000007782					
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
C	GLAUCIA BASTOS					
_		Name of Contact Person	1			
ī	THE TRUST CIRCLE SERVICES, LLC					
_		Firm/ Company				
1	1001 EAST SAMPLE ROAD 10E					
_		Address				
F	OMPANO BEACH FLOR	IDA 33064				
_		City/ State and Zip Cod	e			
ATENI	DIMENTO@THETRUSTO	CIRLCLE.INFO				
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
GLAUCIA BASTOS		954 at (8647884			
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:			
S35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



DIRECTLAB IMPORT AND SALE CORPORATION

(Name of Corporation as c	currently filed with the Florida Dept. of State)
P18000007782	currently filed with the Florida Dept. of State)
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statut ts Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	
	The new rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	1919 VAN BUREN STREET #411
	HOLLYWOOD FL 33020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1919 VAN BUREN STREET #411
	HOLLYWOOD FL 33020
D. If amending the registered agent and/or registered office are registered agent and/or the new registered office a	
Name of New Registered Agent	
	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	
	of 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 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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	SIMONE O PALMA	409 NW 10TH TERRACE E-41
Add X Remove			HALLANDALE BCH FL 33009
2) Change Add			
Remove			
3) Change			
Remove 4) Change			
Add			
Remove 5) Change			
Add			
Remove			
6) Change Add			
Damoua			

Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

,	06/16/2020	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the De	block does not meet the applicable statutory filing requirements, this date with epartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were addaction was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were addaction was not required.	opted by the incorporators without shareholder action and shareholder	
06/16/2020)	
DatedSignature	wo Hedela	
	lirector, president or other officer – if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ited fiduciary by that fiduciary)	
	FABIO HENRIQUE PADETI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	