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SECRETARY OF STATE
TALLAHASSEE FLOOPINA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: COGNITIVA COI	RPORATION	
DOCUMENT NUMBER:	18000012413		
The enclosed Articles of Ame		abmitted for filing.	
Please return all corresponde	nce concerning this ma	tter to the following:	
JOSE	JARDIM JUNIOR		
		Name of Contact Person	n
TAX	DIRECT INCORPORA	ATED	
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
5787	VINELAND RD 205		
		Address	
ORLA	NDO, FL 32819		
		City/ State and Zip Cod	c
jjj@taxdirec	tflorida.com		
		sed for future annual report	notification)
For further information conce	eming this matter, pleas	se call:	
JOSE JARDIM JUNIOR		at ()
Name of Cont	act Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	llowing 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314		Ameno Divisio	Address Iment Section on of Corporations Building

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

COGNITIVA CORPORATION

COGNITIVA CORPORATION		
(Name of Corporat	ion as currently filed with the Flor	ida Dept, of State)
P18000012413		
(Docu	ment Number of Corporation (if knov	vn)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corpo	ration adopts the following amendment(s)
A. If amending name, enter the new name of the c	orporation:	
		The new
name must be distinguishable and contain the wo "Corp," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	p." "Inc." or "Co". A professional	
B. Enter new principal office address, if applicabl (Principal office address MUST BE A STREET AD.		
		- Tu: 6
C. Enter new mailing address, if applicable:	av.	
(Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	
		<u>C</u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered		the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re-	gistered Agent:	
I hereby accept the appointment as registered agent.	l am familiar with and accept the ol	bligations of the position.
Sign	nature of New Registered Agent, if ch	าสารากร

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)

Example:

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.

XChange	PT	<u>John Doe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
<u>X</u> Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	MARCOS MARRA BOLDORI	Rua Alcyr de Araujo Mendonca, 60
X Add			VOLTA REDONDA. RJ
Remove			BRAZIL, 27.258-495
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	-		
Add			
Remove			
5) Change		<u>.</u>	
Add			
Remove			
6) Change			
Add			·
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
		-
		•
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		-

•	07/16/2018	
The date of each amendment(s) add date this document was signed.	ption:	, if other than th
Effective date if applicable:		
·	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep.	ck does not meet the applicable statutory filing requirements, artment of State's records.	this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amen cient for approval.	dment(s)
	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment	
"The number of votes cast for	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	ed by the board of directors without shareholder action and sha	reholder
☐ The amendment(s) was/were adop action was not required.	ed by the incorporators without shareholder action and shareho	lder
07/16/2018 Dated		
(By a dir selected.	ector, president or other officer – if directors or officers have no by an incorporator – if in the hands of a receiver, trustee, or off d fiductory by that fiductory)	
F	REDERICO GUIMARAES	
_	(Typed or printed name of person signing)	
F	RESIDENT	
_	(Title of person signing)	