0180000 41089

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	Idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

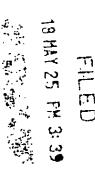
Office Use Only



000313734420

05/25/18--01018--017 **35.00

S TALLENT MAY 2 9 2018



Averd

COVER LETTER

TOr Amendment Section Division of Corporations

NAME OF CORPO	RATION: POLONI, CORP			
DOCUMENT NUMI	BER: P18000041089			
	of Amendment and fee are su	bmitted for fili	ng.	
Please return all corre	spondence concerning this ma	tter to the follo	wing:	
	GLAUCIA BASTOS			
		Name of Co	intact Person	1
	TRUST CIRCLE SERVICE			
	1004 5107 011101 5 501		Company	
	1001 EAST SAMPLE ROA	10E		
		Ad	dress	
	POMPANO BEACH FLOR	IDA 33064		
		City/ State a	and Zip Cod	· ·
ATE	NDIMENTO@THETRUSTO	IRCLE.INFO		
	E-mail address: (to be us	sed for future a	nnual report	notification)
For further informatio	n concerning this matter, pleas	se call:		
GĻAUCIA BASTOS		21.1	954	864-7884
Name (of Contact Person	(11 (Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the l	Florida Depa	irtiment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fil Certified ((Additional enclosed)	Jop <u>y</u> Leopy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

POLONI, CORP. (Name of Corporation as currently filed with the Florida Dept. of State) P18000041089 (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: 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: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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) New Registered Office Address: 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

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 as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: \underline{X} Change	<u>PT</u>	<u>John Doe</u>		
X Remove	$\overline{\Sigma}$	Mike Jones		
<u>X</u> Add	<u>SV</u>	Sally Smit	<u>h</u>	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	<u>ame</u>	<u>Addres</u> s
1) Change	Р	F	ERNANDO MOREIRA	22375 SW 66TH AVE
Add		_		1407
X Remove				BOCA RATON FL 33486
2) Change	Р	L	UIZ FELIPE POLONI	22375 SW 66TH AVE
X Add				1407
Remove				BOCA RATON FL 33486
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				,
5) Change				
Add				
Remove				
() (I)				
6) Change				
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specifie)		
	 ,		
			· - ·
			
f an amendment provides for an exch	ange, reclassification, or c	ancellation of issued s	hares.
provisions for implementing the ame	ndment if not contained in	the amendment itself	<u></u>
(if not applicable, indicate N/A)			
<u> </u>			
	 		
	· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) ac	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
•	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendr fficient for approval.	nent(s)
	toved by the shareholders through voting groups. The following st 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)	
	roung groups	
The amendment(s) was/were ade action was not required.	pted by the board of directors without shareholder action and share	cholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and sharehold	ler
Dated_OS\O	1/2018	
Signature		
(By a d	rector, president or other officer – if directors or officers have not l, by an incorporator – if in the hands of a receiver, trustee, or othe ed fiduciary by that fiduciary)	
•	FERNANDO MOREIRA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	