P18 0000 47872

(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
, ,	
(Document Number)	
(Document Number)	
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01/22/21--01012--004 **43.75

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION:	NTERNATIONAL, CORP		
	1BER: P18000047822			
	es of Amendment and fee are su	bmitted for filing.		
Please return all cort	respondence concerning this ma	atter to the following:		
	WELLINGTON DOS SANT	ros		
	Name of Contact Person			
		Firm/ Company		
	5211 W HILLSBORO BLVI	O APT 207		
	Address			
	COCONUT CREEK, FL 330	073		
		City/ State and Zip Cod	е	
	SANTOSWE@HOTMAIL.C	COM		
	E-mail address: (to be u	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:		
WELLINGTON DO	S SANTOS	at (<u>754</u>	246-9539	
Name	e 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:	
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section		
	vision of Corporations		n of Corporations	
P.C	D. Box 6327	I ne C	entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	DRP	ly filed with the Florida Dept. of State)
(Name o	f Corporation as current	ly filed with the Florida Dept. of State)
218000047822		
	(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
		The new
	orp," "Inc," or "Co". A	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		5211 W HILLSBORO BLVD APT 207
		COCONUT CREEK, FL 33073
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5211 W HILLSBORO BLVD APT 207
		COCONUT CREEK, FL 33073
). If amending the registered agent and new registered agent and/or the new		
Name of New Registered Agent		
	5211 W HILLSBORO BL	VD APT 207
-	(Florida str	eet address)
		22.052
New Registered Office Address:	COCONUT CREEK	Florida 33073

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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.

X Change	PT John I	<u>Doe</u>	
X Remove	V Mike	Jones .	
X Add	SV Sally	<u>Şmith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	<u>".VP</u>	ALESSANDRO SILVA DE SOUZA	21351 SAWMILL CT
_ Add			BOCA RATON, FL 33498
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	 -		
Add			
Remove			
6) Change			
Add			
Remove			

c. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)	<u>, (17) 1-2-2</u> .		
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If an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassifica endment if not con	tion, or cancellation tained in the amen	n of issued shares, dment itself:	
			· -	
				•
				
	·		-	
	• .			

The date of each amendment(s) a date this document was signed.	doption:	, 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 t document's effective date on the D	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action	n and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	;)
•	proved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	Illnoton de Sonto	
(By a d selecte	irector, 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 ted fiduciary by that fiduciary)	(
	(Typed or printed name of person signing)	
	Paside of person signing)	
	(Title of person signing)	