P18000001554

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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	LERMOT TRADI	NG CORP			
	8000067554				
The enclosed Articles of Amen	dment and fee are su	bmitted for fili	ng.		
Please return all correspondence	e concerning this ma	tter to the follo	wing:		
DAYLI	BETANCOURT				
		Name of Co	ontact Persor)	
FOWLE	R RODRIGUEZ, L	LP			
		Firm/ (Company		
355 AL	355 ALHAMBRA CIRCLE, SUITE 801				
	Address				
CORAL	GABLES, FL 3313	34			
		City/ State a	and Zip Code		
DBETANCO	JRT@FRFIRM.CO	М			
E-11	nail address: (to be us	sed for future a	nnual report	notification)	
For further information concern	ning this matter, pleas	se call:			
DAYLI BETANCOURT		at (786	364-8480	
Name of Contact Person			Area Co	de & Daytime Telephone Number	
Enclosed is a check for the foll	owing amount made	payable to the	Florida Depa	rtment of State:	
	43.75 Filing Fee & ertificate of Status	□\$43.75 Fil Certified ((Additiona enclosed)	Copy I copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Ado Amendment Division of C P.O. Box 63 Tallahassee,	Section Corporations 27		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LERMOT TRADING CORP

(Name of Corporation	n as currently f	iled with the Florida	Dept. of State)		
P18000067554					
(Docume	ent Number of C	orporation (if known)	,		
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	Statutes, this <i>Fla</i>	orida Profit Corporat	tion adopts the fo	llowing ame	ndment(s)
A. If amending name, enter the new name of the corp	poration:				
				The	new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the al	"Inc," or "Co	". A professional co	icorporated" or orporation name	the abbrevi must contai	ation n the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	RESS)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))			SECULATIVES:	77.5
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		s in Florida, enter th	e name of the		88 68 84 61
Name of New Registered Agent	_				
	(Florida street				
	(r tortau street	aaaress)			
New Registered Office Address:	(C	ity)	, Florida	(Zip Code)	
				•	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. It		h and accept the oblig	zations of the pos	ition.	
	•				
Signat	ture of New Rea	istered Agent if chan	aina		

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)	Title	<u>Name</u>	Address
1) Change	D	JESUS CASTRO	355 ALHAMBRA CIRCLE
Add			SUITE 801
X Remove			CORAL GABLES, FL 33134
2) Change	D	JESUS TORRES	355 ALHAMBRA CIRCLE
X Add			SUITE 801
Remove			CORAL GABLES, FL 33134
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
The Director has the incorrect last name, it should read Torres instead of Castro.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s)	adoption:	, if other than the
date this document was signed. 8.	/30/2018	
Effective date <u>if applicable</u> :	·	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, t Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes east for the amenda sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following sufor each voting group entitled to vote separately on the amendment(s,	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	<u></u>	
,	(voting group)	
The amendment(s) was/were a action was not required.	idopted by the board of directors without shareholder action and share	eholder
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and sharehold	ler
8/30/20 Dated	18	
Signature		
(By)	director, president or other officer – if directors or officers have not eted, by an incorporator – if in the hands of a receiver, trustee, or othe pinted fiduciary by that fiduciary)	
	JUAN E. SERRALLLES	
	(Typed or printed name of person signing)	
	ATTORNEY IN FACT	
	(Title of person signing)	