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(Reques	stor's Name)
(Addres	s)
(Addres	s)
(City/Sta	ate/Zip/Phone #)
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(Busine	ss Entity Name)
(Docum	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filin	g Officer:

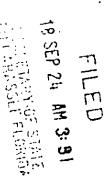
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Joseph

COVER LETTER

TQ: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: ATLETICO BARE	RA USA SOCCER ACADI	EMY INC
DOCUMENT NUME	P18000072101		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	HUGO LINS		
	GIMP ACCOUNTING	Name of Contact Person	1
	3595 SIMMS STREET	Firm/ Company	
	HOLLYWOOD, FL 33021	Address	
		City/ State and Zip Cod	e
hugot	dins@yahoo.com E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
HUGO LINS		at (447-1830
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following 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)
Amo Divi P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, F1, 32314	Ameno Divisio Clifton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

ATLETICO BARRA USA SOCCER ACADEMY INC

(Name of Corporation as currently	y filed with the Florida Dept. of State)		
18000072101				
(Document Number of	f Corporation (if known)			
arsuant to the provisions of section 607.1006, Florida Statutes, this as Articles of Incorporation:	Florida Profit Corporation adopts the f	ollowing	amen	dment(s)
. If amending name, enter the new name of the corporation:				
			The	new
ume must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "ord "chartered," "professional association," or the abbreviation "	Co". A professional corporation nam	r the ab e must c	brevia ontain	ition the
. Enter new principal office address, if applicable:	20815 NE 16TH AVE STE B37			
Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33179	-		 ,,
				
. Enter new mailing address, if applicable:	20815 NE 16TH AVE STE B37			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)				_
	MIAMI, FL 33179	<u> </u>	<u></u>	
			SEP	
. If amending the registered agent and/or registered office addi	ross in Florida, enter the name of the	28.	24	=
new registered agent and/or the new registered office address	E		<u> </u>	Г
Name of New Registered Agent		52	نب	0
tune in their Registered riges.		33,5	<u>(10</u>	
(Florida str	reet address)			
New Registered Office Address:	reet address)	- 		

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 Do	<u>oe</u>					
X Remove	<u>V</u>	Mike Jo	nes					
X Add	<u>sv</u>	Sally Sn	<u>nith</u>					
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			<u>Addres</u> s		
1)Change					-			_
Add								_
Remove								_
2) Change		_		 			<u>-</u> .	
Add					•			
Remove								_
3)Change		<u> </u>		 	-			
Add						· · · · · · · · · · · · · · · · · · ·		
Remove							 .	
4) Change		_						_
Add								
Remove								
5) Change								
Add								
Remove								
0 0								
6) Change	-	_						
Add							<u></u>	_
Remove								_

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f an amendment provid provisions for implemen	es for an exchi	ange, reclassii	ication, or can	i <u>celiation of is:</u>	itealf:	
(if not applicable, in	itting the amer idicate N/A)	idilient it not	, ontained in G	ic amenoment	ttoen,	
(g) and approximate, and						
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The date of each amendmen	t(s) adoption:	, 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 document's effective date on t	this block does not meet the applicable statutory filing requirements, this date with the Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
☐ The amendment(s) was/we must be separately provid	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required. The amendment(s) was/was/was/was/was/was/was/was/was/was/	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder	
Dated	06/2018 X // A Colo fallo	
	By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	ADILSON O COUTINHO FILHO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	