

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |

Office Use Only



100337305721

11/25/19--01028--805 **35.00

10 NOV 25 AM 9: 20

JAN 0 3 ZOZO

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: EXCELLENCE 8 | B DIFFERENTIAL SERVICE | CES INC | | | |
|---|---|--|--|--|--|
| DOCUMENT NUMBER: P19000003509 | | | | | |
| The enclosed Articles of Amendment and fee are s | ubmitted for filing. | | | | |
| Please return all correspondence concerning this ma | atter to the following: | | | | |
| GLAUCIA BASTOS | | | | | |
| | Name of Contact Persor | 1 | | | |
| THE TRUST CIRCLE SE | THE TRUST CIRCLE SERVICES, LLC | | | | |
| | Firm/ Company | | | | |
| 1001 EAST SAMPLE RO | AD 10E | | | | |
| | Address | | | | |
| POMPANO BEACH FLOR | POMPANO BEACH FLORIDA 33064 | | | | |
| | City/ State and Zip Code | | | | |
| ATENDIMENTO@THETRUST | CIRLCLE.INFO | | | | |
| _ | ised for future annual report | notification) | | | |
| | · | | | | |
| For further information concerning this matter, plea | ise call: | | | | |
| GLAUCIA BASTOS | 954 at (| 8647884 | | | |
| Name of Contact Person | Area Coo | de & Daytime Telephone Number | | | |
| Enclosed is a check for the following amount made | payable to the Florida Depa | rtment 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, F1, 32314 | Amend Divisio Clifton 2661 E | Address ment Section n of Corporations Building secutive Center Circle assec, FL 32304 | | | |

19 HOV 25 M 9: 20

Articles of Amendment Articles of Incorporation

EXCELLENCE & DIFFERENTIAL SERVICES INC

| | Articles of Amendment |
|---|---|
| | Articles of Amendment to Articles of Incorporation of NC tion as currently filed with the Florida Dept. of State) ment Number of Corporation (if known) |
| EXCELLENCE & DIFFERENTIAL SERVICES IN | of O _L 9 |
| · · · · · · · · · · · · · · · · · · · | tion as currently filed with the Florida Dept. of State) |
| P19000003509 | non as varients med with the Parina Dept. of State) |
| (Docu- | ment Number of Corporation (if known) |
| Pursuant to the provisions of section 607,1006, Floricits Articles of Incorporation: | da Statutes, this Florida Profit Corporation adopts the following amendment(s |
| A. If amending name, enter the new name of the c | corporation: |
| | The new ord "corporation," "company," or "incorporated" or the abbreviation op," "Inc," or "Co". A professional corporation name must contain the eabbreviation "P,A" |
| B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET AD</u> | |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u> G | OX) |
| | |
| D. If amending the registered agent and/or registe | ered office address in Florida, enter the name of the d office address: |
| new registered agent and/or the new registered | |
| | |
| new registered agent and/or the new registered Name of New Registered Agent | (l-lorida street address) |
| new registered agent and/or the new registered Name of New Registered Agent | (Florida street address), Florida (Cny) |

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; I. Treasurer; S. Secretary, D. Director, TR. Trustee; C. Chairman or Clerk, CEO. Chief Executive Officer, CFO.—Chief Einancial 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: \underline{X} Change | <u>PT</u> | John Doc | |
|---------------------------------|-----------------|-----------------------|---------------------------------------|
| X Remove | \underline{Y} | Mike Jones | |
| X Add | <u>8V</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| T) Change | VP | MARCUS LANA MAGALHAES | 9272 SW 3RD STREET 401 |
| X Add | | | BOCA RATON FL 33428 |
| _ Remove | | | · · · · · · · · · · · · · · · · · · · |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3.) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | - · · · · |
| Remove | | | |
| 51 Change | | | |
| Add | | | |
| Remove | | | <u> </u> |
| | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Artic (Attach additional sheets, if necessary). | (Be specific) | |
|--|--|--|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| If an amendment provides for an eych | nange, reclassification, or cancellation of issued shares, | |
| provisions for implementing the amer (if not applicable, indicate V.1) | endment if not contained in the amendment itself: | |
| . | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| The date of each amendment(s) a | doption: | , if other than the |
|---|---|--------------------------------|
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | | |
| | ino more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the D | block does not meet the applicable statutory filing requirements, this epartment of State's records. | date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were ad by the shareholders was/were so | opted by the shareholders. The number of votes cast for the amendmen afficient for approval. | u(s) |
| | proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendments: | nent |
| | for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| | opted by the board of directors without shareholder action and shareho | lder |
| ☐ The amendment(s) was/were ad action was not required. | opted by the incorporators without shareholder action and shareholder | |
| 11/08/201 | 9 | |
| Dated | | |
| Signature / | | |
| Byac | fire for president or other officer - if directors or officers have not bee | |
| selecte | id, by an incorporator – if in the hands of a receiver, trustee, or other edited fiduciary by that fiduciary) | ourt |
| аррон | | |
| | MARIA VICTORIA R PEREIRA DA CUNHA | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |