orida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

 $\dot{\varpi}$

Account Name : MERCATORZ LP Account Number : I20220000170 Phone : (786)435-0012 Fax Number : (786)435-0012

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN INTERNATIONAL IT-ADVISORS INC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

(3)

COVER LETTER

From: +17866106638 (MERCATORZ LP)

TO: Amendment Sec Division of Corp							
NAME OF CORPORATION: INTERNATIONAL IT-ADVISORS INC DOCUMENT NUMBER: P19000009570 The enclosed Articles of Amendment and fee are submitted for filing.							
	SEBASTIAN DILL						
	Name of Contact Person						
	INTERNATIONAL IT-ADVISORS INC						
	Firm/ Company						
	3250 NE 1st Ave STE 305						
	Address						
	Miami, FL 33137						
City/ State and Zip Code							
	schastian.naumann@it-advisors.international						
	E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:							
SEBASTIAN DILL		at (435-0012				
Name of Contact Person Area Code & Daytime Telephone Number							
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:				
■ \$35 Filing Fee	□\$43.75 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 Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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Articles of Amendment Articles of Incorporation

From: +17866106638 (MERCATORZ LP)

INTERNATIONAL IT-ADVISORS INC	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P19000009670	
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation." "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A "chartered," "professional association." or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	ن ن
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 add new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	
(Florida sti	eet address)
N n 1 1 100 1111 1111	Florida
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	i with and accept the obligations of the position.
Signature of New R	egistered Agent, if changing
•	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e), F.S.

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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:

From: +17866106638 (MERCATORZ LP)

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. Curtently 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>	Join Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$v</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Sebastian F. Dill	3250 NE 1ST AVE STE 305
X Add			MIAMI, FL
Remove			33137
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

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To: +18506176380

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PRESIDENT

(Title of person signing)

	н	23000238032 3
The date of each amendment(s) adop date this document was signed.	rion:	, if other than the
Effective date if applicable:		······
_	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depar	does not meet the applicable statutory filing requirements, this date witness of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareholder action ar	nd shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.	2
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	2023 1111 - 7
"The number of votes cast for	the amendment(s) was/were sufficient for approval	· 1
by	(voting group)	-,
	(voting group)	:
07/06/2023 Dated		r- 2:44
Signature		
selected, b	or, president or other officer - if directors or officers have not been y an incorporator - it in the hands of a receiver, trustee, or other court iduciary by that fiduciary)	
TH	OMAS ZEPF	
	(Typed or printed name of person signing)	