## P190000 22935

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(Add	ress)	
bbA)	ress)	
(1100	1033)	
	<u> </u>	
(City	/State/Zip/Phone	e #)
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(Bus	iness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
Special Instructions to F	ilina Officer:	
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FC ROCHA SERV	/ICES CORP	
DOCUMENT NUMB	ER: P19000022935		
	of Amendment and fee are su	abmitted for filing.	
Please return all corresp	pondence concerning this ma	itter to the following:	
•	GILVAM F DOS SANTOS		
-		Name of Contact Person	1
•	GFS TAX & ACCOUNTING	G SERVICES	
-	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	<del></del>
:	2001 W CYPRESS CREEK	• •	
-		Address	
!	FT LAUDERDALE FL 3330	)9	
-	<u> </u>	City/ State and Zip Code	C
INFO(	@GFSTAXACCT.COM		
	<del>-</del>	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
GILVAM F DOS SAN	TOS	954	9573244
	f Contact Person	at (at (	de & Daytime Telephone Number
Name	Contact reison	Arça Co	de & Daytine Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)
<u>Mail</u>	ing Address	Street	Address
	ndment Section		lment Section
Division of Corporations			on of Corporations
P.O. Box 6327 Tallahassee, FL 32314			Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FC ROCHA SERVICES CORP

(Name	of Corporation as curren	tly filed with the Florida Dept. of St	ate)
P19000022935			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the	ne following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation n	
B. Enter new principal office address,	if applicable:	3000 NW 5TH TER APT 118	<u> </u>
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )	POMPANO BCH FL 33064	<u></u>
			721日
			m
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		3000 NW 5TH TER APT 118	
		POMPANO BCH FL 33064	· 18
D. If amending the registered agent ar new registered agent and/or the ne			<u>he</u>
Name of New Registered Agent			
3000 NW 5TH TER APT 118			
	(Florida :	street address)	
New Projectory I Office Addresses	POMPANO BCH	, Flori	33064
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	(City)	(Zip Code)
		,,	
New Registered Agent's Signature, if c I hereby accept the appointment as regis			a position
t nereby accept the appointment as regis	terea agent. Tam jamuta	r with and accept the obligations of the	: postuon.
		<u> </u>	
	Signature of New	Registered Agent, if changing	

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)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	DA ROCHA, FABIO C	3000 NW 5TH TER APT 118
Add			POMPANO BCH FL 33064
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

/A	ch additional sheets, if necessary). (Be specific)	
		—
lf ar	amendment provides for an exchange, reclassification, or cancellation of issued shares,	
pro	visions for implementing the amendment if not contained in the amendment itself:	
	(if not applicable, indicate N/A)	
4		
-		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this d document's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendmente by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
■ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	ler
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
JUNE 18, 2019 Dated	
Signature Tale Cardare de Rada	
(Hy 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 couappointed fiduciary by that fiduciary)	
DA ROCHA, FABIO C	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	