P19000027975

(Re	questor's Name)	
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300368818913



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	N: LGTECH USA CO	ORP		
DOCUMENT NUMBER:	P19000027975			
The enclosed Articles of Am	endment and fee are su	bmitted for filing.		
Please return all corresponde	nce concerning this ma	tter to the following:		
		MARCO REIS		
_		Name of Contact	Person	
	1	USA TAX CORPOR	ATION	ļ.
		Firm/ Compa	ny	•
		591 E SAMPLE F	RD	
		Address		
	1	POMPANO BEACH	FL 330	064
	-	City/ State and Zi	p Code	
•	Ü	SATAX@USATAX	FL.CO:	M
	-mail address: (to be us	~		
For further information conc	erning this matter, plea	se call: at (54	788-1818
Name of Con	tact Person	\ Ar	ea Cod	e & Daytime Telephone Number
Enclosed is a check for the fo	ollowing amount made	payable to the Florida	a Depar	rtment of State:
S35 Filing Fee	343.75 Filing Fee & Certificate of Status	S43.75 Filing For Certified Copy (Additional copy enclosed)		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A		_		ddress
Amendmer Division of	Amendment Section Division of Corporations			
P.O. Box 6	The Centre of Tallahassee			
Tallahasse	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of

LGTECHLISA CORP

	ECHECH OSA CORE	
(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)
P190000	27975	
	(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 following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
		The new
	Corp." "Inc." or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word ."
B. Enter new principal office address, if applicable:		671 SE 18TH AVENUE
(Principal office address <u>MUST BE A S</u>		POMPANO BEACH FL 33064
		·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		671 SE 18TH AVENUE
		POMPANO BEACH FL 33064
		<u>ن</u> ي
new registered agent and/or the ne		
Name of New Registered Agent	671 SE 18TH AVENUE	
		treet address)
New Registered Office Address:	POMPANO BEACH	Florida 33064
		(City) (Zip Code)
		(επ, τ
New Registered Agent's Signature, if c I hereby accept the appointment as regis	hanging Registered Ager tered agent. I am familian	nt: r with and accept the obligations of the position.
	<u> </u>	Registered Agent, if changing

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	<u>John D</u>	<u>oe</u>	
X Remove	V	Mike Jo	<u>ones</u>	
X Add	<u>SV</u>	Şally Sı	mith_	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	P	_	MARCO AURELIO MOREIRA REI	4182 ROSA DRIVE
Add X Remove				DEERFIELD BEACH FL 33064
2) Change	P	_	JULIANA DE OLIVEIRA REIS	671 SE 18TH AVENUE
XAdd				POMPANO BEACH FL 33064
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
· ·	
f an uniondessat succides for an eval	hands realises fraction or concellation of issued shares
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

. . .

	06/17/2021	
The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
06/17/2 Effective date <u>if applicable</u> :	021	
Enective date it applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirements, thi tment of State's records.	s date will 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 and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	d by the shareholders. The number of votes cast for the amendment for approval.	ient(s)
	red by the shareholders through voting groups. The following starth voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
bv		
···	(voting group)	
06/17/2021 Dated		
selected, t	to, president or other officer – if directors or officers have not by y an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
M.	ARCO AURELIO MOREIRA REIS	
_	(Typed or printed name of person signing)	
PR	ESIDENT	
_	(Title of person signing)	