P19000035118

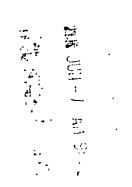
	(Requestor's Name)			
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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: MIAMI SOCCER DCFC CORP DOCUMENT NUMBER: P19000035118 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARCOS FALCAO Name of Contact Person MIAMI SOCCER DCFC CORP Firm/ Company 300 BAYVIEW DR APT 403 Address SUNNY ISLES BEACH FL 33160 City/ State and Zip Code MARCOSGFRODRIGUES@IG.COM.BE E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



(Name of Corporation as current)	v filed with the Florida Dept. of State)	
P19000035118		
(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 amen	ndment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbrevi Co". A professional corporation name must contai	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		<u> </u>
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 address new registered agent and/or the new registered office address		
Name of New Registered Agent	 	
(Florida str	eet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	_
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		
Signature of New R	egistered 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.

X Change	PT	John Doe		
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	FALCAO RODRIGUE	z.marcos G	300 BAYVIEW DR APT 403
Add				SUNNY ISLES BEACH.FL 33160
Remove				
2) Change		_		
Add				
Remove				
3) Change	-	·		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary).	rticles, enter change(s) here:). (Be specific)
	
If an amendment provides for an ex-	change, reclassification, or cancellation of issued shares.
provisions for implementing the an	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	_

The date of each amendment(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 this document's effective date on the I	block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s sufficient for approval.)
	pproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendmentts):	nı
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholde	г
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
06/04/20 Dated	19	
Signature	Morcos Polaso Rodrigues	
selec	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other countinted fiduciary by that fiduciary)	
	MARCOS G FALCAO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	