Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068 Phone : (407)326-8484

Fax Number : (407)604-6519

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

Email Address: __contact@medeirossouza.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN LFM EXPORT CORPORATION

Certificate of Status	J
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Electronic Filing Menu Corporate Filing Menu

Help:

1/1

RUBEM SOUZA

COVER LETTER

TO: Amendment Se Division of Cor				
NAME OF CORPO	DRATION: LFM EXPORT CO	DRPORATION		
DOCUMENT NUM	D10000055470			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Rubem Souza			
	· ·	Name of Contact Person	1	- 28
	MEDEIROS SOUZA CORP			2024 MAR - 1 AM 9: 00
Firm/ Company				元 第
	1711 Amazing Way, Ste 213			豊立
		Address		- (SS)
	Ococe, FL 34761			
		City/ State and Zip Cod	С	E
	contact@medeirossouza.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Rubem Souza		407 at (326-8484	
Name of Contact Person		Area Co	de & Daytime Telephone Numl	per
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	S43.75 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)	
	niling Address		Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
	Hahassee Fl. 32314		Nouroe Street Suite 810	

Tallahassee, FL 32303

Articles of Amendment

to Articles of Incorporation of

LFM EXPORT CORPORATION			
(Name	of Corporation as currently file	ed with the Florida Dept. of State)	
P19000055479			
	(Document Number of Co.	rporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation	.1006, Florida Statutes, this <i>Flor</i>	idu Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			<i>∴77₀</i> ⇔
name must be distinguishable and contain "Ime.," or Co.," or the designation "Cochartered," "professional association," B. Enter new principal office address, (Principal office address MUST BE A Section of the mailing address of the professional address	Corp," "Inc," or "Co". A proceed office address in Id/or registered in Id/or registered in Id/or registered in Id/or registered in Id/or Id/or registered in Id/or registered in Id/or registered in Id/or registered in Id/or reg	ofessional corporation name must	contain the R - 1 AM 9: 00
Name of New Registered Agent	MEDEIROS SOUZA CORP		
	1711 Amazing Way, Ste 213		
	(Florida street ac		
New Registered Office Address:	Ocoee		(Zip Code)
	(City)	(Zīp Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent:		
	Signature of New Regist	red 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)

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:

<u>X</u> Change	<u>PT</u>	<u>John Doc</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>S</u>	CINTIA LISIANE SCHNEIDER	12706 BIDEFORD AVENUEWINI
Add			ZOZL MAR
X Remove			S AR .
2) Change			A
Add			9:
Remove 3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)	
		
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The date of each amendment(s) date this document was signed.) adoption:	if other	than the
0,	3/01/2024		
Effective date if applicable:	(no more than 90 days after amendment file date)		
	(no more than 90 days after amenament file date)		
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will no Department of State's records	t be list	ed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder action and sha	ar e holde:	r
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	202	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	4 MAR -	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	<u> </u>	i -===
by	SCHNEIDER SOL	AH	5 1
oy <u>.</u>	(voting group)	9: 00	
Dated_03/01/20	024	_	
Signature _	J. L		
(By a 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 court inted fiduciary by that fiduciary)		
	Rubem Souza LL.M		
	(Typed or printed name of person signing)	<u>.</u>	
	Authorized Representative		
	(Title of person signing)		