## P190000 67221

(Re	equestor's Name)		
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C. GOLDEN AUG 2 3 2020

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: LOOGAN USA IN	*C		
	IBER: P19000067221		·	
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	CONSULTING SERVICES	OF SOUTH FLORIDA		
		Name of Contact Person	1	
		Firm/ Company		
	2121 PONCE DE LEON BL	VD. 1050		
		Address		
	CORAL GABLES, FL 33134	4		
		City/ State and Zip Code	e	
	gerencia@fyalegal.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
EDNA ZAMBRAN	0	at (	6030427	
Name	of Contact Person		de & Daytime Telephone Number	_
Enclosed is a check (	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enciosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
An Di P.G	niling Address mendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co	Address iment Section in of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

LOOGAN USA INC

2021."" [4 FN 8:24

192	<u>、 (年 年) つ・乙年</u>
(Name of Corporation as currently filed with the Florida Dept. of State	2)
P19000067221	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the fits Articles of Incorporation:	following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abi "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must "chartered." "professional association," or the abbreviation "P.A."	breviation "Corp.," t contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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 in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: , Florida (City)	(Zip Code)
	·
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the p	osition.

Signature of New Registered Agent, if changing

Check if applicable

<sup>☐</sup> 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: X Change	<u>PT</u>	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>	<u>Addres</u> s
1) Change	VP	LUIS A PINILLA PLAZAS	2020 NW 429TH AVH. 201
Add			MIAMI, FL 33182
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here:  Attach additional sheets, if necessary). (Be specific)	
Attach additional sneets, if necessary). (Be specific)	
	<del></del>
	<del>_</del>
<del>_</del>	
	·
	· <del></del>
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
,	

The date of each amendment(s) a date this document was signed.	5/27/2020 doption:	, if other than th
Effective date if applicable:		
<del></del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements epartment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareho	ılder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amoufficient for approval.	:ndment(s)
must he separately provided fo	proved by the shareholders through voting groups. The followin each voting group entitled to vote separately on the amendmen for the amendment(s) was/were sufficient for approval	
bv	(voting group)	
•	(voting group)	
05/ <u>J</u> 7 Dated	M	
selecti	lirector, president or other officer – if directors or officers have red, by an incorporator – if in the hands of a receiver, trustee, or outed fiduciary by that fiduciary)	
	LUIS A PINILLA PLAZAS	
	(Typed or printed name of person signing)	<del></del>
	VP	
	(Title of person signing)	