1·1/10/21 11/57AM 8508176380 Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

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Account Number : I20160000049 Phone

: (954)384-8565

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Help

TO: Amendment Section

COVER LETTER

Division of Corporations NAME OF CORPORATION: LATIN AMERICAN BUSINESS PLATFORM CORP DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: **DIEGO FIGUEROA** Name of Contact Person E&F LATIN GROUP LLC Firm/ Company 1820 N CORPORATE LAKES BLVD SUITE 109 Address **WESTON FL 33326** City/ State and Zip Code DIRGO@EFLATINACCOUNTING.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DIEGO PIGUEROA at (954) 384 8565

Area Code & Daytime Telophone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Foc & □\$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
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassec, F1, 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LATIN AMERICAN BUSINESS PLATFORM CORP (Name of Corporation as currently filed with the Florida Dept, of State) P19000073767 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new malling 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 (Clay) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent;

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filled 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add. Example:

X Change	PT	John Dog				
X Remove	¥	Mike Jones				
_X Add	SY	Sally Smith				
Type of Action (Check One)	Title	Name	Address			
l) Change	P	OSORIO, CLOBIS A	1820 N CORPORATE LAKES BL			
Add		-	SUITE 109			
X Remove			WESTON, FL 33326			
2) X Change	P	YANEZ, ALEXIS	1820 N CORPORATE LAKES BL			
Aıld			SUITE 109			
Remove 3) Change			WESTON, FL 33326			
Add						
Remove						
4) Clunge						
Remove						
5) Change						
Add						
Remove						
f) Change						
Add						
Remove						

E. If amending or adding (Attach additional sheet	is, if necessary).	(Be specific)	HOLEN HALL			
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F. If an amendment prov provisions for implem	ides for an exch	nnge, reclassific	ation, or cance	ilation of issued	ahares. If:	
(If not applicable,	indicate N/A)				···	
RESIGNATION OF MEM	BER					
						V
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10/19/2021	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
10/19/2021	
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 date wildocument's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required.	d shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval	JECHTIARY HVISION OF C
by "	8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
(voting group)	<u> </u>
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10/19/2021	<u>%</u> = 6
Dated	± 🚎
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Signature Signature	<u>-</u> 및 ~
(By 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 court appointed fiduciary by that fiduciary)	_ 7 ,
CLOBIS AOSORIO	
(Typed or printed name of person signing)	
MEMBER - PRESIDENT	
(Title of person signing)	