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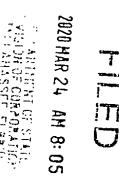
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BARBOSA FILM	1S INC	
DOCUMENT NUMBER: P19000083866		
The enclosed Articles of Amendment and fee are su	ıbmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
FREDERICO LORETTO BA	ARBOSA	
	Name of Contact Perso	n
	Firm/ Company	
3643 NW 35th ST		
	Address	
COCONUT CREEK/FLORI		
	City/ State and Zip Cod	e
FRED@BARBOSAFILMS.	COM	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, plea-	se call:	
FREDERICO L. BARBOSA	at (⁷⁵⁴	757-6880
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee \$\Bigcup \$\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 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

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HENRIQUES 5 SERVICES CORP			
(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of	'State)
P19000083866			
	(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 adopt	s the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
BARBOSA FILMS INC			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation name	he abbreviation "Corp.,"
B. Enter new principal office address,	if applicable:	3643 NW 35th ST	
(Principal office address MUST BE A S	TREET ADDRESS)	COCONUT CREEK/FLORID	A 33066
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3643 NW 35th ST	
		COCONUT CREEK/FLORIDA	A 33066
		4	
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent		<u>ss:</u>	of the
Name of New Registered Agent	3643 NW 35th ST		
	(Florida s	treet address)	
N B : 100 111	COCONUT CREEK	,	., 33066
New Registered Office Address:		, FI	orida (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			the position: 2020 HAR 24
Follow			24 24 25 26
	Signature of New	Registered Agent, if changing	
Check if applicable			
☐ The amendment(s) is/are being filed p	ursuant 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>	John Doe	
X Remove	$\underline{\mathbf{v}}$	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	P	HENRIQUE MIRANDA MATOS	153 SE 10th CT
Add			DEERFIELD BEACH FL 33441
X Remove			
2) X Change	PD	FREDERICO LORETTO BARBOS/	3643 NW 35th ST
Add			COCONUT CREEK FL 33066
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<u>. </u>
Add			
Remove			
6) Change			
Add			
Remove			

f 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)	\ 	nal sheets, if neces.	sary). (Be specific,	,		
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(if not applicable, indicate N/A)	<u>provisions for</u>	<u>r implementing th</u>	<u>le amendment if not</u>	contained in the ame	endment itself:	
		olicable, indicate N	I/A)	-		
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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requireme Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the arsufficient for approval.	mendment(s)
	pproved by the shareholders through voting groups. The follow or each voting group entitled to vote separately on the amendment	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	"	
-	(voting group)	
Dated 3/1	4/2020 Flesha	
Signature	Fille	
select	director, president or other officer – if directors or officers have ed, by an incorporator – if in the hands of a receiver, trustee, or nted fiduciary by that fiduciary)	
	FREDERICO LORETTO BARBOSA	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -