# P19000093705

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### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GREEN CHARTE	ER ENTERPRISE CORP	
	BER: P19000093705		
	s of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	Antonio Leuzzi		
		Name of Contact Persor	n
	ALX Consulting Services, L	I.C	
		Firm/ Company	
	2295 S Hiawassee Rd., Suite	• •	
		Address	
	Orlando, FL 32835		
		City/ State and Zip Cod	e
	info@alxcs.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further informatic	on concerning this matter, plea		544-0474
Name	of Contact Person	Area Co	544-0474 de & Daytime Telephone Number
Enclosed is a check f	or the following amount made		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, 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

#### GREEN CHARTER ENTERPRISE CORP

		Amendment	2
	to Articles of Ir		
THE PART OF LABOUR DATE DURING CO.		of .	
GREEN CHARTER ENTERPRISE CO		A. Chairman Chairman Co.	<del>`</del> ;
( <u>Name)</u> 19000093705	of Corporation as curren	tly filed with the Florida Dept. of State)	T
1700073705	(Dagumant Number	of Corporation (if known)	<u> </u>
		·	· ()
rsuant to the provisions of section 607. Articles of Incorporation:	,1006, Florida Statutes, this	s Florida Profit Corporation adopts the follow	ing amendment(s) to
If amending name, enter the new n	ame of the corporation:		
!/A			The new
ame must be distinguishable and contain lnc.," or Co.," or the designation "C chartered," "professional association,"	"orp," "Inc," or "Co".	"company," or "incorporated" or the abbrevia A professional corporation name must conta "	tion "Corp.,"
Enter new principal office address,	if applicable:	150 SE 2ND AVE, SUITE 300	
Principal office address <u>MUST BE A STREET ADDRESS</u> )		MIAMI, FL 33131	
Enter new mailing address, if applicable:		LEO CE AND AND CHUTT 100	
(Mailing address MAY BE A POST		150 SE 2ND AVE, SUITE 300	<del></del>
		MIAMI, FL 33131	
If amending the registered agent ar new registered agent and/or the new	nd/or registered office add w registered office addres	dress in Florida, enter the name of the	
Name of New Registered Agent	ALX CONSULTING SE		
	2295 S. HIAWASSEE RI	D., SUITE 104	_
	(Florida si	treet address)	_
	ORLANDO	, Florida 32835	
New Registered Office Address;		, riorida	

Signature of New Registered 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:

President: V= Vice President: T= Treasurer: S= Secretary: D= Director: TR= Trustee: C= Chairman or Clerk: CEO= Chief Executive Officer: CEO= 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 PT John Doc X Remove $\underline{\mathbf{V}}$ Mike Jones $\underline{X}$ Add SVSally Smith Type of Action <u>Title</u> Address. Name (Check One) LEUZZI, ANTONIO AP2295 S. HIAWASSEE RD 1) \_\_\_\_ Change SUITE 104 Add ORLANDO, FL 32835 \_\_\_\_ Remove TEIXEIRA, JOSE MARCELO 150 SE 2ND AVE 2) Number Change SUITE 300 \_\_\_\_ Add MIAMI, FL 33131 \_\_\_ Remove 3.) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 5) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 6) \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove

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/3)	! A	e). (Be specific)		
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file a	late)
Note: If the date inserted in this l document's effective date on the D	block does not meet the applicable statutory filing requirer epartment of State's records.	nents, 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 sha	areholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the afficient for approval.	: amendment(s)
	proved by the shareholders through voting groups. <i>The followed each voting group entitled to vote separately on the amend</i>	
"The number of votes cust	for the amendment(s) was/were sufficient for approval	
hy		
	(voting group)	
09-01-202 Dated		
(By a c selecte	irector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, ted fiduciary by that fiduciary)	
	JOSE MARCELO TEIXEIRA	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	