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JUN 16 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	AR SOUZA IN	VESTMENTS CO	RP				
DOCUMENT NUMBER:	P20000007376	,					
The enclosed Articles of Amenda	nent and fee are su	bmitted for filing.					
Please return all correspondence	concerning this ma	itter to the followin	ıg:				
SUZANA	VENTURINI						
	Name of Contact Person						
SVENTUI	SVENTURINI BUSINESS SERVICES						
	Firm/ Company						
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	Address						
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	-	City/ State and	Zip Code				
ADM@SV	VENTURINI.COM	1					
E-ma	il address: (to be u:	sed for future annu	al report n	notification)			
For further information concerning			954	366 5353			
Name of Contact	Person	at (Area Cod	e & Daytime Telephone Number			
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Mailing Addre Amendment Se Division of Co P.O. Box 6327 Tallahassee, FI	rporations		Division The Ce 2415 N	address nent Section of Corporations ntre of Tallahassee . Monroe Street, Suite 810 (see, FL 32303			

Articles of Amendment to Articles of Incorporation of

1020 JUN 01 Pil 2: 19

	13:30 DV V P1 2: 19
(Name of Corporat	tion as currently filed with the Florida Dept. of State)
(Document)	iment Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florids Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the c	corporation:
	The new
	corporation," "company," or "incorporated" or the abbreviation "Corp.," c," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable Principal office address MUST BE A STREET AD	le: DDRESS)
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
	ered office address in Florida, enter the name of the
new registered agent and/or the new registered	d office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
New Registered Office Address.	, Florida (City) (Zip Code)
ew Registered Agent's Signature, if changing Re	egistered Agent:
hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
	The Day of the Control of the Contro
Sign	nature 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.

P = President; V = Vice I Executive Officer; CFO = President, Treasurer, Dire Changes should be noted	if necess ector title President Chief Fi ector woi in the fol wes the co	ary) by the first letter of the office title: T = Treasurer: S = Secretary; D = Director: TR = Treasurer: f an officer/director holds more than all be PTD. lowing manner. Currently John Doe is listed as the proporation, Sally Smith is named the V and S. These series.	one title, list the first letter of each office held. PST and Mike Jones is listed as the V. There is
X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP	Raphaela Rodrigues de Lima	1064 RIO CT, LOT #365
X Add			DEERFIELD BEACH, FL 33064
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			

____ Add

___ Remove

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

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an amendment provides for an exchange, reclar	ssification, or cancellation of issued shares,
an amendment provides for an exchange, reclar rovisions for implementing the amendment if n (if not applicable, indicate N/A)	ssification, or cancellation of issued shares, of contained in the amendment itself:
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rovisions for implementing the amendment if n	ssification, or cancellation of issued shares, out contained in the amendment itself:
rovisions for implementing the amendment if n	ssification, or cancellation of issued shares, out contained in the amendment itself:

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The day of the	05/26/2020	
The date of each amendment(s) as date this document was signed.	option:	, if other than the
Effective date if applicable:	6/2020	hilaCa
	(no more than 90 days after and	JUNO1 , ile date): 19
Note: If the date inserted in this bedocument's effective date on the De	ock does not meet the applicable statutory fi partment of State's records.	iling requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of director	s without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of vote fficient for approval.	s cast for the amendment(s)
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groue each voting group entitled to vote separately o	ps. The following statement on the amendment(s):
	for the amendment(s) was/were sufficient for a	
by		
	(voting group)	·
05/26 Dated	/2020	
Signature Ro	hala Rodrigues de Li	ma_
5elected	rector, president or other officer — if directors of a neceing of a ne	or officers have not been ver, trustee, or other court
	RAPHAELA RODRIGUES DE LIMA	hada ledriques de Lima
	(Typed or printed name of person si	gning)
	VP	
•	(Title of person signing)	