P200000 11590

| (Requestor's Name) | | | |
|-----------------------------------------|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | TION: REVOTRADE, C | ORP | | |
|----------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--|
| DOCUMENT NUMBE | R: P20000011590 | | | |
| The enclosed Articles of | Amendment and fee are sub | mitted for filing. | | |
| Please return all correspo | ondence concerning this mate | ter to the following: | | |
| | LUIS M. ALDA | YA | | |
| _ | | Name of Contact Person | | |
| | REVOTRADE, CORP | | | |
| | Firm/ Company | | | |
| | 17813 SW 146 CT | | | |
| _ | | Address | | |
| | MIAMI, FL 33177 | | | |
| _ | | City/ State and Zip Code | | |
| | miglafran@hotmail.com | | | |
| - | E-mail address: (to be us | ed for future annual report | notification) | |
| For further information | concerning this matter, pleas | se call: | | |
| LUIS. M. ALDAYA | | 786 | 797 9119 | |
| Name of | Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment of State: | |
| ■ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Amer Divis P.O. | ng Address ndment Section ion of Corporations Box 6327 hassee, FL 32314 | Ameno Divisio The C 2415 I | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 | |

Articles of Amendment to Articles of Incorporation of

REVOTRADE, CORP

| (Name of Corporation as cur | rently filed with the Florida | Dept. of State) | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------|----------------|
| P20000011590 | | | |
| (Document Numb | ber of Corporation (if known |) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation: | this Florida Profit Corporat | tion adopts the following am | endment(s) to |
| A. If amending name, enter the new name of the corporation | <u>π:</u> | | |
| name must be distinguishable and contain the word "corporation" Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "I | ". A professional corporati | The auted" or the abbreviation "Clion name must contain the | orp.," |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | | |
| | | <u> </u> | 792 |
| | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | , | 020 MAR 23 |
| | | | PF . |
| | | _ | ^ب ب |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade | | he name of the | 39 |
| Name of New Registered Agent | | | |
| | | | |
| (Flori | ida street address) | | |
| New Registered Office Address: | (City) | , Florida(Zip Code) | |
| | (Ciù) | (21) Coue) | |
| New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami | Agent: iliar with and accept the obli | gations of the position. | |
| Signature of N | iew Registered Agent, if chan | nging | |
| 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:

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 | Τ | FRANCY J. BLANCO | 17813 SW 146 CT |
| Add | | | MIAMI, FL 33177 |
| X Remove | | | |
| 2) Change | SEC | FRANCY J. BLANCO | 17813 SW 146 CT |
| X Add | | | MIAMI, FL 33177 |
| Remove Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| (Attac | ending or adding addition An additional sheets, if nece | ssary). (Be specific) | | | |
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| <u>If an</u> | amendment provides for | an exchange, reclassi | fication, or cancellat | ion of issued shares, | |
| prov | isions for implementing (if not applicable, indicate | Ma) | contained in the amo | enament itseit: | |
| | y nor appricable, mateure | , | | | |
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| | 03/18/2020 | |
|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| The date of each amendment date this document was signed | (s) adoption: | , if other than the |
| Effective date <u>if applicable</u> : | 03/18/2020 | |
| | (no more than 90 days a | fter amendment file date) |
| Note: If the date inserted in t document's effective date on the | his block does not meet the applicable state Department of State's records. | tutory filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/wer action was not required. | e adopted by the incorporators, or board of | directors without shareholder action and shareholder |
| ☐ The amendment(s) was/wer by the shareholders was/we | e adopted by the shareholders. The number sufficient for approval. | r of votes cast for the amendment(s) |
| | e approved by the shareholders through voil of for each voting group entitled to vote set | |
| "The number of votes | cast for the amendment(s) was/were suffic | tient for approval |
| by | | ," |
| | (voting group) | |
| 03/13 Dated | 3/2020 | |
| (B | y a director, president or other officer – if officer – if officer – if in the hands pointed fiduciary by that fiduciary) | |
| | MIGUEL J. ALDAYA | |
| | (Typed or printed name or | person signing) |
| | PRESIDENT | |
| | (Title of person signing) | |