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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: REDRESS INTER	NATIONAL HOLDING C	CORP
DOCUMENT NUMB			
The enclosed Articles o	of Amendment and fee are su	abmitted for filing.	
Please return all corresp	oondence concerning this ma	itter to the following:	
1	Matias Hercovich		
~		Name of Contact Person	n
-		Firm/ Company	
· ·	5349 NW 104 Path		
-		Address	
-	Doral, FL, 33178		
		City/ State and Zip Cod	e
t	mhercovich@gmail.com		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea.	se call:	
Matias Hercovich		917	7949975
Name o	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:
S35 Filing Fee	■\$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		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2022 MAR -9 PM 12: 12

(Name of Corporation as cu	rrently filed with the Floriding Dept. of State OF STATE
REDRESS INTERNATIONAL HOLDING CORP - P20000	1011 / 0.97 0.00 0.00
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	on:
	The new
name must be distinguishable and contain the word "corporatio". Inc.," or Co.," or the designation "Corp," "Inc," or "Chartered," "professional association," or the abbreviation.	on," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable:	6349 NW 104 Path Doral, FL 33178
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	-
C. Enter new mailing address, if applicable:	6349 NW 104 Path Doral, FL 33178
(Mailing address MAY BE A POST OFFICE BOX)	03777W 1077 UNI DOTAL 1 D 33110
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	
Name of New Registered Agent	
(Flor	rida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fan	niliar with and accept the obligations of the position.
Signature of i	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:

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	PT	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			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	- <u>-</u>
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
ugment t	ne number of shares the Corporation is authorized to issue, from 10,000,000 to 10,400,000
	
	
•	
<u>If an a</u>	nendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>provi</u> :	ions for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)
/,	noi appacame, maicale 1975)

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June 10, 2020
The date of each amendment(s) adoption:, if other than the date this document was signed.
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 will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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
by
(voting group)
Signature (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)
Rossana Ceccato 2088anna Ceceato
(Typed or printed name of person signing)
President
(Title of person signing)