P200000 33190

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	e #j
PICK-UP	☐ WAIT	MAIL
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(Dc	ocument Number)	
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05/19/20--01015--031 **35.00



Amend

JUN 1 () 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations Havorlands Trading loop NAME OF CORPORATION: P<u>200000 33190</u> DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Arolina Torres
Name of Contact Person KTORRES SERVILES WERP Firm Company Federal Hwy Ste 2017
Address Field Scull, R 33441
City/State and Zip Code A Ktomessemicus wm be used for future annual report notification) For further information concerning this matter, please call: arolina Torres Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

to

Articles of Incorporation

of

Flavorlands Ti	rading w.	P			
(Name of Corporation	as currently filed v	with the Florida Dep	t. of State)		
P2000003319	<i>10</i>				
	nt Number of Corpor	ration (if known)			_
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	statutes, this <i>Florida</i>	Profit Corporation a	dopts the follow	ving amendm	ient(s) to
A. If amending name, enter the new name of the corp	poration:				
				The ne	31'
name must be distinguishable and contain the word "corp" Inc.," or Co.," or the designation "Corp," "Inc." of "chartered," "professional association," or the abbrevia	or "Co". A profes	v," or "incorporated" ssional corporation i	or the abbrevi name must con	ation "Corp , stain the wor	 cd
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)				
		 		782	
			-	 -	·
C. Enter new mailing address, if applicable:				<u> </u>	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)					i Ti
				亞	
				ü	
				78	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		<u>Florida, enter the na</u>	me of the		
Nume of New Registered Agent	nec addi css.				
	(Florida street addre	285)			
New Registered Office Address:			. Florida		
new negative ett syntee state ett.	(Cuy)			lip Code)	
New Registered Agent's Signature, if changing Regist Thereby accept the appointment as registered agent – La		l accept the obligation	ns of the positio	m.	
	·	,			
	EV D	a a contra			
Signatu	ire oj New Registere	d 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)

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> <u>John I</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones .	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	Director	Cesar Viana Klem	Av são Luc Gorzaga 23
Add			apt 301 - Centro -
Remove			upt 301-Centro - Luisburgo MG 36923-000 BR.
2) Change			36923-000 BK.
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	-		
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or</u> (Attach <i>addition</i>	adding additional A al sheets, if necessary	<u>rticles, enter chang</u>). (Be specific)	e(s) here:			
NIA						
· •		4				
					 	
·						
						
				.		
					<u>-</u>	
. If an amendme	nt provides for an eximplementing the a	vehange, reclassifica	ition, or cancella	ition of issued sh	ares.	
(if not app	licable, indicate NA)					
NIA						
						_

•

The date of each amendment(s) ac	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements partment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ame fficient for approval.	ndment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	12/2020 (Sour Viana Lle na rector, president or other officer - if directors or officers have n	
Signature	orar Wana Dem	
(By a di	rector, president or other officer - if directors or officers have n	ot been
sølected	l, by an incorporator – if in the hands of a receiver, trustee, or o	ther court
арроіпі	ed fiduciary by that fiduciary)	
	CESAR VIANA KLEM	
	(Typed or printed name of person signing)	
	DI RECTUR	
	(Title of person signing)	