P20000035765

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
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(Document Number)			
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2020 OCT 27 PM 2: 41
SECRETARY OF STATE

12/1/20

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: WE LOVE GLOB	AL INC		
DOCUMENT NUMI				
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	itter to the following:		
	LEONARDO A LIZARDO			
		Name of Contact Person	า	
	WE LOVE GLOBAL INC			
		Firm/ Company		
	$1051~\mathrm{NE}~163~\mathrm{STREET}~\mathrm{APT}$	104		
		Address		
	MIAMI, FL 33162			
		City/ State and Zip Cod	e	
	MIGRATAXUSA@HOTMA	AIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas RDO	se call: at (4365003	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r 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)	□\$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, FL 32314		Amend Divisio The C 2415 î	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

FILED

2020 OCT 27 PH 2: 41

WE LOVE GLOBAL INC.			
(Name of Corporation as current 220000035765	ation as currently filed with the Florida Dept. of State F STATE		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation adopts the following amendmen		
A. If amending name, enter the new name of the corporation:			
	The new		
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 "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
3. Enter new principal office address, if applicable:	1051 NE 163 STREET		
Principal office address <u>MUST BE A STREET ADDRESS</u>)	APT 104		
	MIAMI FL, 33162		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1051 NE 163 STREET		
	APT 104		
	MIAMI FL, 33162		
If amending the registered agent and/or registered office adding registered agent and/or the new registered office addres			
Name of New Registered Agent			
(Florida si	treet address)		
New Registered Office Address:	, Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	it: with and accept the obligations of the position.		
Signature of New .	Registered Agent, if changing		
Sheek if applicable	C C C C C C		

 \square 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>	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	VP	ANGELICA M, VILLEGAS	3550 NW 85TH CT
Add			APT 544
X Remove			DORAL, FL 33122
2) Change	VP	LEONARDO A LIZARDO	1051 NE 163 STREET
X Add			APT 104
Remove 3) Change			MIAMI, FL 33162
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
A d d			
Remove			

ttach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment proyides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

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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 date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements epartment 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 add action was not required.	opted by the incorporators, or board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the ame officient for approval.	ndment(s)
	proved 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)	
10-19-2020		
selecte	irector, president or other officer – if firectors or officers have nd. by an incorporator – if in the hands of a receiver, trustee, or otted fiduciary by that fiduciary)	
	ANGELICA M VILLEGAS	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	-