## P20000037159

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

O: Amendment Section Division of Corporations				
DOCUMENT NUMBER: PODOOD 37159				
OCUMENT NUMBER: + 00000 37159				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
MERLY Lisseth Hernandez				
Name of Contact Person	_			
EXPORTA INTELLED & XA ( MERROTIAN)				
EXPORTACIONES DEXA CORPORATION Firm/Company	_			
1 /				
2702 N.W. ZI AVENUE				
Mix Mi Dade, Florida				
City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
MERLY LISSEH. Hernonder at (786) 536-8111  Name of Contact Person Area Code & Daytime Telephone Number				
Name of Contact Person Area Code & Daytime Telephone Numb	ber			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$35 Filing Fee & S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				
Amendment Section Amendment Section				
Division of Corporations Division of Corporations				

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

(Name of Corpora	ation as currently	filed with the Florid	la Dept. of State)	
(Doc	cument Number of	Corporation (if know	n)	
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this I	Florida Profit Corpor	ation adopts the fol	lowing amendment(s
A. If amending name, enter the new name of the	corporation:			
				The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "In "chartered," "professional association," or the abb	ıc," or "Co".   A	ompany," or "incorpo professional corpor	orated" or the abbroation name must o	eviation "Corp.," contain the word
B. Enter new principal office address, if applical				· · · · · · · · · · · · · · · · · · ·
(Principal office address <u>MUST BE A STREET A.</u>	<u>DDRESS</u> )			
				202
				2020 1101
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE</u> )	<u>BOX</u> )			
				<u> </u>
				<del>o</del>
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered.</li> </ol>			the name of the	
Name of New Registered Agent			· · · · · · · · · · · · · · · · · · ·	<del></del>
			<del></del>	
	(Florida stre	et address)		
New Registered Office Address:		(C)	, Florida	(Tim Conda)
	(	(City)		(Zip Code)
New Registered Agent's Signature, if changing R	Registered Agent:			
hereby accept the appointment as registered agent			igations of the pos	ition.
	anature of New Re	paistered Agent if cha	naina	<del></del>
Sig	gnature of New Re	gistered Agent, if cha	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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u> y	y <u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Rudy Villalta	2702 N.W. 21 AVENUC MIAMI, Pl. 33142
Add			MIAMI, Pl. 33142
X Remove  2) Change	$\checkmark$	Rudy Villalta	2702 X.W. 21 DVONVE
Add	<del></del>		miami, Fl. 33142
Remove Change			
Add			20 22
Remove			7020 TOY
4) Change			
Add			
Remove			.: w
5) Change			<u> </u>
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

stach additional sheets, if necessary). (Be specific)	
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an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
()	

The date of ea	ch amendment(s) adoption:	11/06/2020	if ot	her than the
date this docum  Effective date	ient was signed.			
Directive date	п присвое.	(no more than 90 days after amendment file	date)	
	ate inserted in this block does active date on the Department	not meet the applicable statutory filing requir of State's records.	ements, this date will not be	listed as the
Adoption of A	mendment(s)	CHECK ONE)		
The amenda	• •	he incorporators, or board of directors without s	hareholder action and shareho	older
	nent(s) was/were adopted by t sholders was/were sufficient fo	he shareholders. The number of votes east for tor approval.	ne amendment(s)	
		the shareholders through voting groups. The foing group entitled to vote separately on the amen		
		nendment(s) was/were sufficient for approval	2020 NOV 17 PH	
ъу	(1	voting group)		! i
	Dated /1 /06/	2020	PH :: 30	· · · · · · · · · · · · · · · · · · ·
	Signature 177 at	tti)		
	selected, by an in	resident or other officer – if directors or officers neorporator – if in the hands of a receiver, truste ary by that fiduciary)		
	_Mec	(Typed or printed name of person signing)	Martinez	
	_	(Typed or printed name of person signing)		
	Pro	esident		
		(Title of person signing)		