P20000040784

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: LEVY PRODUCT	USA INC				
DOCUMENT NU	JMBER: P20000040784					
The enclosed Arti	cles of Amendment and fee are su	bmitted for filing.				
Please return all co	orrespondence concerning this ma	tter to the following:				
	LEVY MONTES DE OCA	LEVY MONTES DE OCA				
	C.C.	Name of Contact Person	1			
	6735 W 26 DR 511	Firm/ Company				
	HIALEAH, FL 33016	Address				
		City/ State and Zip Cod	· ·			
	bwtusa@gmail.com					
For further inform	ation concerning this matter, pleas	sed for future annual report se call:	normean(m)			
305-978-8349		305.	978-8349			
Na	me of Contact Person	Aren Co	de & Daytime Felephone Number			
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:			
⊠ \$35 Filing Fe	e □\$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	Ameno Divisio The C 2415 (Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303			

Articles of Amendment to Articles of Incorporation

FILED

2021 NOV 15 PM 12: 03

SECRETARY OF STATE

(Name of Corporation as currently filed with the Florida Dept. of State)

P20000040784

(Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 6735 W 26 DR 5-11 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) HIALEAH, FL 33016 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Elorida street address) New Registered Office Address: (Cuvr New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

Signature of 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)

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: (For officer 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, P1 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)	Title	<u>Name</u>	Address
1) Change	VP	YOAN CARLOS GARCIA	6735 W 26 DR 5-11
X Add			HIALEAH, FL 33016
Remove		-	
2) Change			
Add			
Remove Change			
Add			
Remove		-	
4) Change			
Add			
Remove		-	
5) Change			
Add			
Remove		-	
6) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			

Attach additional sheets, if necessary	ticles, enter change(s) here: (Be specific)	
-1		
		··
		
<u>f an amendment provides for an ex</u>	change, reclassification, or cancellation of issue	ed shares,
(if not applicable, indicate N A)	endment if not contained in the amendment it	<u>self:</u>
(y ma uppreting, marrie 17 11)		
	· · · · · · · · · · · · · · · · · · ·	
		

	11/05/2021	
The date of each amendment(s) as date this document was signed.	loption:	, if other than the
_	5/2021	
Effective date <u>if applicable</u> :		
	tho more than 90 days after amendment file d	afer
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requiren partment of State's records.	nents, 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.	pted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the flicient for approval.	amendment(s)
	roved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amend	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
11/05/202 Dated		
selected	rector, president or other officer—if directors or officers had, by an incorporator—if in the hands of a receiver, trustee, ed fiduciary by that fiduciary)	
	LEVY MONTES DE OCA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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