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Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LENSUR CORP Account Number : I20180000038

Phone Fax Number

: (305)364-8824 : (305)364-8824

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN WORLDWIDE INTERNATIONAL TRADING USA CORP

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION:	TERNATIONAL TRADIN	G USA COR	
DOCUMENT NUMBE	P20000093205			
	Amendment and fee are sub	omitted for filing.		
Please return all corresp	ondence concerning this mat	ter to the following:		
N	ELSON ODELLA			
_		Name of Contact Person	<u> </u>	
R	EGISTERED AGENT			
_		Firm/ Company		r
6	447 MIAMI LAKES DR ST	E 103 F		<u> </u>
_	· · · · · · · · · · · · · · · · · · ·	Address		
N	MIAMI LAKES, FL 33014		·	
_		City/ State and Zip Code	2	
16	ensur@livc.com			
	E-mail address: (to be us	ed for future annual report	notilication)	
For further information	concerning this matter, pleas	se call:		
NELSONODELLA		at (		
. Name of Contact Person		Arca Co	de & Daytime Telephone Num	ber
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
\$35 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)	
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amena Divisio The C 2415 I	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

WORLDWIDE INTERNATIONAL TRA		
(Name o	f Corporation as currently filed with the Florida Dept. of State)	
P20000093205		
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment	mt(s) to
A. If amending name, enter the new na	me of the corporation:	
-	Tha nev	y.
"Inc.," or Co.," or the designation "C "chartered," "professional association,"  B. Enter new principal office address, (Principal office address MUST BE A S)  C. Enter new mailing address, if appli (Mailing address MAY BE A POST of	if applicable;  TREET ADDRESS)    Comparison of the series	
new registered agent and/or the nev		
Nume of New Registered Agent	ACHOT MENDELIAN	
	6447 MIAMI LAKES DR STE 103F MIAMI LAKES, FL 33014	
	(Florida sweet address)	
New Revistered Office Address:	, Florida	
THE STATE OF THE PARTY OF THE P	(Ciny) (Zip Code)	
New Registered Office Address:  New Registered Agent's Signature, if c I hereby accept the appointment as regist	(Ciny) (Zip Code)	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

X Change	<u>PT</u> <u>Jo</u>	ohn Doc		
X Remove	<u>v</u> <u>N</u>	Mike Jones		
X Add	<u>sv</u> s	Sally Smith		
Type of Action (Check One)	<u>Tiūc</u>	<u>Name</u>	<u>Addres</u> s	
1) Change				2022 OCIT
Add				
Remove			<u> </u>	
2) Change				=
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Remove Change				
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4) Change				
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f an amendment provides for an exchange, reclassification, or cancellation	ndment itself:	
provisions for implementing the amendment if not contained in the amer		
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f an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amendment if not applicable, indicate N/A)		
provisions for implementing the amendment if not contained in the amer		
provisions for implementing the amendment if not contained in the amer		
provisions for implementing the amendment if not contained in the amer		

	10/17/2022	if other than the
The date of each amendment(s) add date this document was signed.	•	_, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Effective date if applicable:	(no more than 90 days after umendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ick does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	ted by the incorporators, or board of directors without shareholder action and	shareholder
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendment(s) licient for approval.	
☐ The amendment(s) was/were appr must be separately provided for e	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	2
"The number of votes cast for	or the ameadment(s) was/were sufficient for approval	#⊒°; 1022 OCT 2 I
by	(voting group)	. 12
10/17/2022 Dated	19 5	AM 8: 03
Selected	etor, pe sub-ni or other officer - if directors or officers have not been , by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	)3
	NELSON ODELLA	
•	(Typed or printed name of person signing)	
_	REGISTERED AGENT	<u>.                                    </u>
	(Title of person signing)	