## P21000008437

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## **COVER LETTER**

**TO:** Amendment Section . Division of Corporations

NAME OF CORPO	RATION: SOLAR CARGO	USA CORP				
	BER: P21000008437					
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	atter to the following:				
	Orlando De Freites SR.					
		Name of Contact Perso				
	SOLAR CARGO USA COR		ui			
		Firm/ Company	<u></u>	<del></del>		
	8333 NW 53rd ST 450	· ······ · · · · · · · · · · · · · · ·				
		Address				
	Doral FL 33166					
		City/ State and Zip Cod	le	<del></del>		
	o.defreites@solarcargo.com					
	E-mail address: (to be us	sed for future annual repor	t notification)			
For further information	on concerning this matter, pleas	786	290-7472			
Name	of Contact Person	Area Co	ode & Daytime Telephone Num	nber		
Enclosed is a check for	or the following amount made					
■ \$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)	SECRETARY OF TALLAHASSE	2021 FEB 24	
Am Div P.O	Illing Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amen Divisi The C 2415	Address diment Section on of Corporations dentre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		PM 2:57	

## Articles of Amendment to Articles of Incorporation of

SOLAR CARGO USA CORP

(Name	of Corporation as current	ly filed with the Florida	Dept. of State)
P21000008437			
	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1.1006, Florida Statutes, this	Florida Profit Corporati	on adopts the following amendment(s) t
A. If amending name, enter the new n	same of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "( "chartered," "professional association,	Corp," "Inc," or "Co"	A professional corporation	ted" or the abbreviation "Corp"
B. Enter new principal office address. (Principal office address MUST BE A S		N/A	
(remember office namess MOST BE AS	TREET ADDRESS )		
		<del>-</del>	
			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if appl		N/A	
(Mailing address <u>MAY BE A POST</u>	VERICE BUX)		
D. If amonding the sectional access to	-dl		
D. If amending the registered agent as new registered agent and/or the ne	w registered office address	ress in Piorida, enter the	e name of the
Name of New Registered Agent	N/A	-	
Name of New Registered Agent		<del></del> -	
	771		· · · · · · · · · · · · · · · · · · ·
		eet address)	
New Registered Office Address:	N/A		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if o	handing Degistered Acous		
I hereby accept the appointment as regist	tered agent. I am familiar	<u>:</u> vith and accept the oblige	ations of the position.
	di	· · · · · · · · · · · · · · · · · · ·	
	Signature of New R	egistered Agent, if change	ing
Check if applicable			
☐ The amendment(s) is/are being filed p	oursuant 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, Salty Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Salty Smith, SV as an Add.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	Orlando De Freites SR.	8333 NW 53RD ST STE 450
X Add		· <del>-</del>	DORAL FL 33166
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

vy). (Be specific)	**************************************		
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exchange, reclassifica	ation, or cancellation	of issued shares.	
A)	DIAMEG IN THE AMERIC	intent Heart.	
	<del></del>	<del></del>	
		······································	
*			
	exchange, reclassific	exchange, reclassification, or cancellation amendment if not contained in the amend	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:

	02/19/2021
The date of each amendment(s)	adoption:, if other than the
date this document was signed.	
02	/19/2021
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes can	t for the amendment(s) was/were sufficient for approval
by	
	(voting group)
02/19/202 Dated Signature	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	ORLANDO DE FREITES SR
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)