P21000015097

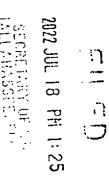
(Requestor's Name)			
(Address)			
	Address)		
(0	City/State/Zip/Phone #)		
PICK-UP	☐ WAIT ☐ MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
	J. HORNE		
	OCT 17 2022		

Office Use Only



200390856082

07/.:/22~-01027--0:5 **39.00



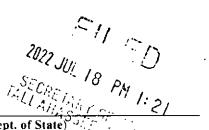
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: WESTERN HILLS	DISTRIBUTORS CORP	
DOCUMENT NUM	P21000015097		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	JOSE GENNARE		
		Name of Contact Person	1
		Firm/ Company	
	2550 STAG RUN BLVD UN	HTE 614	
Address			
	CLEARWATER - FLORIDA	A - 33765	
		City/ State and Zip Code	e e
	DEGENNARE@GMAIL.CO)M	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
JOSE GENNARE		at (⁷²⁷	2168055
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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	Address ment Section in of Corporations cutre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



WESTERN HILLS DITRIBUTORS CORP

(Name of Corporatio	on as currently filed with the I	lorida Dept. of State
P21000015097		,
(Docum	ent Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Co	prporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:	
name must be distinguishable and contain the word "co "Inc.," or Co" or the designation "Corp." "Inc," "chartered," "professional association," or the abbrev	or "Co". A professional co	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO)</u>	<u></u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered of		nter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.		ne obligations of the position.
Signa	ture 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; 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>	John Doe		
X Remove	<u>v</u> <u>M</u>	Mike Jones		
X Add	<u>SV</u> <u>Ş</u> a	ally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change		VIEIRA SILVEIRA, AMAURI	ST JOAO DOMINGUES OLIVEIR	
Add			RIBEIRAO PIRES, SP 09 400-BR,	
XX Remove				
2) Change	V.P	ALBERTO PALUAN, CARLOS	ST JOAO DOMINGUES OLIVEIR	
XX Add			RIBEIRAO PIRES, SP 09 400-BR.	
Remove 3) Change	CFO	DEGENNARE, JOSE	4145 TRACK ROAD, SUITE 200	
Add			CLEARWATER, FL 33766	
XXX Remove				
4) Change	P	GENNARE, JOSE	P O BOX 15135	
Add			CLEARWATER - FL 33766	
XXX Remove				
5) Change	COO	ROYAL EXPORT & IMPORT CEN	4145 TRACK ROAD SUITE 200	
Add			BURLINGTON, ON L7L6A-3 CA	
Remove				
6) Change			····	
Add				
Remove				

Attach <i>add</i>	ng or adding additional Articles, enter change(s) here: litional sheets, if necessary). (Be specific)
	
·	
f an amen	dment provides for an exchange, reclassification, or cancellation of issued shares,
provision	s for implementing the amendment if not contained in the amendment itself:
(ij noi	t applicable, indicate N/A)

•

•

.

The date of each amendment(s) ad	7/12/2022	if other than the
date this document was signed.	option	If other than the
Effective date if applicable:		
	(no more than 9)	0 days after amendment file date)
Note: If the date inserted in this blocument's effective date on the Dep		rable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopaction was not required.	pted by the incorporators, or l	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf		e number of votes cast for the amendment(s)
		ough voting groups. The following statement vote separately on the amendment(s):
"The number of votes east f	or the amendment(s) was/we	re sufficient for approval
by		"
	(voting group)	
7/12/2022 Dated		
Signature	and the same of th	
selected		cer – if directors or officers have not been e hands of a receiver, trustee, or other court
	JOSE GENNARE	
-	(Typed or printed	name of person signing)
I	INCORPORATOR	

(Title of person signing)