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Tallahassee, FL 32314

TO: Amendment Section

COVER LETTER

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Division of Corporations			est.
NAME OF CORPORATION:	OUR W	ORLD USA CORP.	
DOCUMENT NUMBER:	P2100003	8271	
The enclosed Articles of Amendmen	ut and fee are su	bmitted for filing.	
Please return all correspondence cor	ncerning this ma	tter to the following:	
_ -	RICARDO RE	SINO Name of Contact Pe	rson
		Firm/ Company	
	8004 NW 15	4 STREET #117	
		Address	
	MIAMI LAKES	,FL 33016	
		City/ State and Zip C	ode
	RICUSAR@GMAI	CL COM	
E-mail a		sed for future annual rep	port notification)
	,	•	
For further information concerning t	this matter, pleas	se call:	
		at ()
Name of Contact Per	son	Area	Code & Daytime Telephone Number
Enclosed is a check for the following	g amount made	payable to the Florida [Department of State;
-	5 Filing Fee & cate of Status	☐\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	& \$\sumsymbol{\sumsymbol{\subsymbol{\sin}\sin\sin\sin\sin\sin\sin\sin\sin\sin\sin
Mailing Address		Str	eet Address
Amendment Section			endment Section
Division of Corpo	rations		ision of Corporations c Centre of Tallahassee
P.O. Box 6327 Tallahassee, FL 33	2314		5 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

OUR WORLD USA CORP.

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

P21000038271		
(Does	rument Number of Corporation (if kno	own)
Pursuant to the provisions of section 607,1006. Flori its Articles of Incorporation:	ida Statutes, this Florida Profit Corpo	oration adopts the following amendment
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb	c," or "Co". A professional corpo	The new porated or the abbreviation "Corp.," oration name must contain the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	BOX)	
D. If amending the registered agent and/or registered agent and/or the new registered		r the name of the
Name of New Registered Agent		
	(Florida street address)	<u></u>
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.	egistered Agent:	·
Sig	mature of New Registered Agent, if cl	nanging

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 C nange	<u>P1</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	LUCIANA RESINO	8004 NW 154 STREET #117
Add			MIAMI LAKES, FL 33016
X Remove			
2) Change			
Add			- ,
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment provides for an exchange, reclassification, or cancellation of issued shar	es.
orovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(y noi appacame, maicaie som)	
·-··	

The date of each amendment(s) ad-	option:	, if other t	han the
date this document was signed.			
Effective date if applicable:			
	(no more than	90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep		icable statutory filing requirements, this date will not be listed	d as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
∑ The amendment(s) was/were adopted action was not required.	oted by the incorporators, or	board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adop by the shareholders was/were suf	•	he number of votes cast for the amendment(s)	
☐ The amendment(s) was/were appromust be separately provided for €	oved by the shareholders the each voting group entitled to	rough voting groups. The following statement o vote separately on the amendment(s):	
"The number of votes cast f			
by	(voting group)	'''	
	(vening group)		
Dated5/3/	/2021		
Signature	Ricardo	Revinsi	
(By a dir	ector, president of other off	icer – if directors of officers have not been	
	, by an incorporator – if in the diductory by that fiductory	he hands of a receiver, trustee, or other court y)	
	RICARDO R	RESINO	
_	(Typed or printed	d name of person signing)	
	DIRECTOR		
-	(Title of person s	igning)	