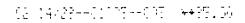
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE APR 20 2023

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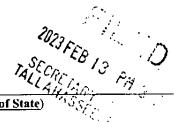


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	RPORATION: A&B SARMAT U	ISA, CORP.	
DOCUMENT N	D21000070265		
The enclosed Art	icles of Amendment and fee are su	bmitted for filing.	
Please return all c	correspondence concerning this ma	atter to the following:	
	ALBERTO PADILLA		
		Name of Contact Person	1)
	A&B SARMAT USA, CORI	P	
		Firm/ Company	
	10421 NW 28TH ST UNIT I	D-112	
		Address	· · · · · · · · · · · · · · · · · · ·
	DORAL FLORIDA 33172		
		City/ State and Zip Code	· ·
	facturacion@abwcommerce.	com	
	-	sed for future annual report	notification)
For further inform	nation concerning this matter, plea HNEIDER	se call: at (at	2130385
N:	ame of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fe	ee	S43.75 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	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of



		TO THE MARKET	Mig :
(Name of Corporati	on as currently filed with the Flor	rida Dept. of State)	
(Docum	nent Number of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	Statutes, this <i>Florida Profit Corpo</i>	oration adopts the following an	nendment(s) t
A. If amending name, enter the new name of the co	orporation:		
		The	e new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professional corpo	porated" or the abbreviation "Coration name must contain the	Corp.," e-word
B. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADI</u>			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
			·
). If amending the registered agent and/or registe	red office address in Florida, ente	er the name of the	
new registered agent and/or the new registered			
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		. Florida	
The Magnitude Office Than Co.	(City)	(Zip Code	
D. D. Carlotte Charles Construction Control of the			
New Registered Agent's Signature, if changing Reginery in the appointment as registered agent.	istered Agent: I am familiar with and accept the ϵ	obligations of the position.	
Sign	ature of New Registered Agent, if c	hanging	

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)

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>T</u>	HECTOR A. SCHNEIDER	10421 NW 28TH ST DORAL FL
Add X Remove			
2) Change			
Add Remove 3) Change			
Add Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

The state of the s	cles, enter change(s) here: (Be specific)
-	
f a- amandment provides for an arch	canno realescification or consultation of issued shares
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		·
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements partment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareho	lder 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 ame flicient for approval.	ndment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
02/08/2023 Dated		
(By a di selected	rector, president or other officer – if directors or officers have not, by an incorporator – if in the hands of a receiver, trustee, or ot ed fiduciary by that fiduciary)	
	HECTOR A. SCHNEIDER	
	(Typed or printed name of person signing)	<u> </u>
	(T) TREASURER	
	(Title of person signing)	···

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