forida Department of State

Division of Corporations Electronic Filing Cover Sheet

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2

Account Name : TAXLEAF.COM INC Account Number : I20140000084 Phone : (305)541-3980 Fax Number : (786)713-1940

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

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN AMAZING IMPORT & EXPORT CORP

| 。 1987年 - 1988年 - | | | |
|--|---------|--|--|
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> H22000367981 3 Articles of Amendment to Articles of Incorporation of

| AMAZING IMPORT & EX | PORT CORP | | |
|--|---|------------------|--|
| (Name of Corporation as currently | filed with the Florida Dept. of State) | | _ |
| P2100010041 | 1 | | |
| (Document Number of | Corporation (if known) | | _ |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation: | Ploridu Profit Corporation adopts the following | g amendment(s |) to |
| A. If amending name, enter the new name of the corporation; | | | |
| | | The new | |
| name must he distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." | ompany," or "incorporated" or the abbreviation professional corporation name must contain | – on "Corp.," | |
| B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | | |
| C. Enter new mailing address, if applicable; (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | 2022 OUT 27 | 26.00 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| D. If amending the registered agent and/or registered office address: Name of New Registered Agent | ess in Florida, enter the name of the | AH 8: 50 | . Ti |
| | | | |
| (Florida stre | er address) | | |
| New Registered Office Address: | , Florida | | |
| | (City) ,7lp+ | Codej | |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w | oith and accept the obligations of the position. | _ | |
| Signature of New Re | egistored Agont, if changing | | |
| Check if applicable | | | |

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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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 = ChiefExecutive 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.

| Example: X Change | PT | John Doe | |
|------------------------|--------------------------|---------------------------|--|
| X Remove | $\underline{\mathbf{V}}$ | Mike Jones | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action | <u>Title</u> | <u>Name</u> | <u>Address</u> |
| (Check One) 1) Change | S | MARCELO, MARINS RODRIGUES | 1549 NE 123RD ST |
| Add | | | NORTH MIAMI, FL 33161 |
| X Remove | | | |
| 2) Change | | | |
| Add | | | 7972 (161 |
| Remove 3) Change | | <u> </u> | |
| Add | | | = <u>= </u> |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| آر Change | | <u> </u> | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

H22000367981 3 E. If amending or adding additional Articles, enter change(s) here:

| (Attach additional sheets, if necessary). (Be specific) | | |
|--|-------------|---------------|
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| | | Ari o. |
| . If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | , • | Č |
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|---|---|--------------------|-------------|--------|
| The date of each amendment(s) ado date this document was signed. | ption: | , i | f other th | an the |
| Effective date <u>if applicable</u> : | | | | |
| | (no more than 90 days after amendment file date) | | | |
| Note: If the date inserted in this blood document's effective date on the Depa | ck does not meet the applicable statutory filing requirements, urtinent of State's records. | this date will not | be listed | as the |
| Adoption of Amendment(s) | (CHECK ONE) | | | |
| The amendment(s) was/were adopt action was not required. | ed by the incorporators, or board of directors without sharehold | er action and shar | reholder | |
| The amendment(s) was/were adopt by the shareholders was/were suffi | ed by the shareholders. The number of votes east for the amendicient for approval. | lment(s) | | |
| | ved by the shareholders through voting groups. The following such voting group entitled to vote separately on the amendment's | | | |
| "The number of votes cast fo | the amendment(s) was/were sufficient for approval | | | |
| by | | | 207.2 | |
| | (voting group) | | 2022 OCT 27 | 17 |
| 10/14/2022 Dated | | · . | | , d |
| Signature | ctor, president or other officer - if directors or officers have not | house | ξ. Θ: | |
| selected. | by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary) | | 50 | |
| | JAIR A GEROLIN | | | |
| . – | (Typed or printed name of person signing) | | | |
| | PRESIDENT | | | |

(Title of person signing)