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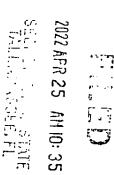
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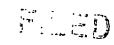
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Mutant inc.					
	UMBER: P22000004278	-				
	icles of Amendment and fee are su	bmitted for fil	ing.			
Please return all c	orrespondence concerning this ma	atter to the follo	owing:			
	Cristina Tordin					
		Name of C	ontact Person	n		
	Caribros					
		Firm/ (Company			
	299 Alhambra Circle, Suite 4	299 Alhambra Circle, Suite 403				
		Ad	dress			
	Coral Gables, FL 33134					
		City/ State	and Zip Cod	e		
	cristina@caribros.com					
	E-mail address: (to be us	sed for future a	nnual report	notification)		
For further inform	nation concerning this matter, plea	se call:				
Cristina Tordin	at i	,305	921-9562			
Na	Area Code & Daytime Telephone Number					
Enclosed is a chec	ck for the following amount made	payable to the	Florida Depa	artment of State:		
S35 Filing Fe	e \$\Bigsiz \$\\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified (Additiona enclosed)	Copy I copy is	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810			

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Mutant Inc.

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

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable: (Mailing address, if applicable): (Mailing address MAY BE A POST OFFICE BOX)

New Registered Agent's Signature, if changing Registered Agent:

new registered agent and/or the new registered office address:

Name of New Registered Agent

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Florida street address)

(City)

, Florida

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.

Example: X Change	<u>PT</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>	Name	<u>Addres</u> s
1) Change	CEO	Alexandre Bichir	Rua Hungria, 574. Floor 10 to 40
x Add			Cj 11
Remove			Sao Paulo, SP 01455-000 - BR
2) Change	CEO	Gustavo Bassetti	Rua Hungria, 574. Floor 10 to 40
Add			Cj 11
X Remove 3) Change			Sao Paulo, SP 01455-000 - BR
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach add	ditional shee	ts, if necessary)	ticles, enter cha (Be specific)				
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f an amen provision	ndment prov	ides for an exc	change, reclassi	fication, or cand	ellation of issued	l shares,	
(if no	t applicable,	indicate N/A)		<u> </u>	- amenament na	<u></u>	
				<u> </u>			
							
							
							

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date,)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirement pepartment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the am ufficient for approval.	endment(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	ng statement nt(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selecte	lirector, president or other officer – if directors or officers have ed, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	not been other court
	Fernando Cariello	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	<u> </u>