P22000012590

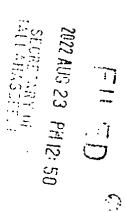
(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:	DRNE 2022		

Office Use Only



700393213137

0.020 224-01010 -609 **85.00



COVER LETTER

TO: Amendment Sect Division of Corpo			
NAME OF CORPOR	RATION: DAIRY CHOICE	FRADING INC	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	CARLOS I BARBOSA		
		Name of Contact Persor	1
	MATRIX INTL. BUSINESS	CONSULTING LLC	
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	759 SW FEDERAL HIGHW.	AY SUITE 304	
		Address	
	STUART, FLORIDA, 34994		
		City/ State and Zip Cod	e
	INFO@MATRIX-USA.US		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call;	
CARLOS J BARBOS	A	at (⁵⁶¹	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Articles of Amendment

DAIRY CHOICE TRADING INC		SEGRE STATE: 48		
(<u>Name of Co</u>	rporation as curren	itly filed with the Florida Dept; of State).		
P22000012590		MY SOER TO		
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607,1006 its Articles of Incorporation:	, Florida Statutes, thi	is <i>Florida Profit Corporation</i> adopts the following amendment(s) t		
A. If amending name, enter the new name	of the corporation:			
		The new		
	" "Inc." or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
B. Enter new principal office address, if ap		759 SW FEDERAL HIGHWAY SUITE 304		
(Principal office address MUST BE A STRE		STUART, FLORIDA, 34994		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		759 SW FEDERAL HIGHWAY SUITE 304		
		STUART, FLORIDA, 34994		
D. If amending the registered agent and/or				
new registered agent and/or the new reg	•			
Name of New Registered Agent	MATRIX INTL. BUSINESS CONSULTING LLC			
759	759 SW FEDERAL HIGHWAY SUITE 304			
		street address)		
New Registered Office Address:	JART	Florida		
		(City) (Zip Coder		
New Registered Agent's Signature, if chang	ing Registered Age	nt:		
		r with and accept the obligations of the position.		
(- /5	1.3/.		
	Signayure of New	Registered Agent, if changing		
	, , ,			

Check if applicable

 \square 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 Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
51 Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	ticles, enter char (Be specific)	<u>—</u> :			
				•	
				· · · · · ·	
				· · · · · · · · · · · · · · · · · · ·	
		<u></u>			
			-		
					
					
		· 			
f an amendment provides for an exc	hange, reclassifi	eation, or cancell	ation of issued	shares,	
provisions for implementing the am	endment if not c	ontained in the a	mendment itse	<u>lf:</u>	
(if not applicable, indicate N/A)					
					···

-

The date of each amendment() adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	08/16/2022	
<u></u>	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requi	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for e sufficient for approval.	the amendment(s)
	upproved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amo	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
08/16/2 Dated	022	
	741	
Signature	a director, president or other officer - if directors or officer	- baye set buse
sele	cted, by un incorporator—if in the hands of a receiver, trust	
арр	ointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	Miquel
	_	9
	VAZQUEZ HERLANDA, MIGUEL , P	
	(Title of person signing)	

- . . .