Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000340453 3)))



H230003404533ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

OCT -3 AM 9:30

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : TAX HOUSE LLP Account Number : I20150000069 Phone : (954)482-5000

Fax Number

: (954)241-5600

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

Email Address:_	state@taxhouse.us		

COR AMND/RESTATE/CORRECT OR O/D RESIGN ONE TALENT MANAGEMENT LATIN AMERICA CORP

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu



2023 OCT -3 AM 9: 59

7-2 PM10:

24 13000

From: Tax Hour

H23000340453.3

Articles of Amendment to Articles of Incorporation of

	(Name of Corporation as cu	rrently filed with the Florid	a Dept. of State)		
P22000020346					
	(Document Nun	iber of Corporation (if knows	1)	· · · · · · · · · · · · · · · · · · ·	
Pursuant to the provision: its Articles of Incorporati	s of section 607.1006, Florida Statutes our	, this Florida Profit Corporu	tion adopts the follow	ving amendr	nent(s) to
A. If amending name, e	nter the new name of the corporation	<u>wi):</u>			
"Inc., " or Co., " or the	ible and contain the word "corporatio designation "Corp," "Inc," or "Co al association," or the abbreviation "	 A protessional cornora 	ruted" or the abbrevie tion name musi con	The ne tion "Corp. tain the wo	3 · 787?
F. Parkanananan dari L.	er			-	<u> </u>
Fincipal office address	office address, if applicable: MUST BE 4 STREET ADDRESS)				<u></u>
. 2	,				ယ်
					-
				11	1
Enter new mailing a	ddress, if applicable: Y BE A POST OFFICE BOX)			Fig	ڢ
(maning dairess <u>31A</u>	I BE A POST OFFICE BOX				59
		·		· ·	. –
15					
new registered agent	tered agent and/or registered office and/or the new registered office add	<u>address in Florida, enter th</u> Tress:	ie name of the		
Name of New Res	gistered Agent	·			
	·				
	(Florid	ia virvoi (uldress)	· · · · · · · · · · · · · · · · · · ·		
Nov Registered t.	Office Address:		. Florida		
		(City)		Codes	
and the section of the section of					
ew Registered Agent 5; tereby accept the appoin	Signature, if changing Registered A Iment as registered agent. I am famil	<u>tewt:</u> far with and accent the ablic	ations of the medical		
	,	the state of the state of the state of	according the pastion.	•	
	Signature of Ne	w Registered Agent if chang	ing		
reck if applicable					
	e being filed pursuant to s. 607,0120 (

٠ĭo:

1123000340453 3

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 afficer/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		
\underline{X} Remove	<u>\('\) \</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addics</u> s	2023 OCT
1)Change	D	YULIYA BEYGELZIMER	9062 FIANO PLACE	007
X Add			BOCA RATON, FL 3349	96 22
Remove				
2) Change				
Add				<u> </u>
Remove 3.) Change				
Add			*****	
Remove				·····
4) Change				
Add				· ·
Remove			· ———	
5) Change				.
Add				
Remove			***************************************	
6) Change				
Add				,
Remove				

H23000340453/3

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specifie)		
-		****	
			
			۔
			7023
		77.1	9
			-4
			١
		3,4	-
****		7:31	¥
		<u> </u>	,
		TIŞ.	
			
an amendment provides for an exclu-	ange, reclassification, or cancellation of issued shares.		
(if not applicable, indicate N(A)	adment if not contained in the amendment itself:		

1123000340453-3

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval by (voting group)
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
Dated Sep 28, 2023
Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
VICTOR AFFONSO G PIGNATON
(Typed or printed name of person signing)
PRESIDENT/DIRECTOR
(Fitte of person signing)