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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	QUINTINO MULT	ISERVICES CORP	
DOCUMENT NUM	P22000072251		
			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	FABIO V DE CARLOS		
		Name of Contact Person	1
		Firm/ Company	
	6402 Cava Alta Drive, Apt 10		
	Orlando, FL 32835	Address	
		City/ State and Zip Code	2
	lucianaqdpcarlos@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas	e call:	
FABIO V DE CARLO	OS	407 at (453-7603
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Dîv P.C	iling Address endment Section vision of Corporations b. Box 6327 lahassee, FL 32314	Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation

	tly filed with the Florida Dept. of Sta	<u>te</u>)
² 22(NNX)72251		
(Document Number	of Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the	c following amendment(
. If amending name, enter the new name of the corporation:		
une must be distinguishable and contain the word "corporation,"	"company " or "inverserated" or the a	The new
Inc.," or Co.," or the designation "Corp," "Inc," or "Co". chartered," "professional association," or the abbreviation "P.A.	A professional corporation name mu	
Enter new principal office address, if applicable:	6402 Cava Alta Drive, Apt 102	SE SE
rincipal office address <u>MUST BE A STREET ADDRESS</u>)	Orlando, FL 32835	ω ==
		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	6402 Cava Alta Drive, Apt 102	21
	Orlando, FL 32835	
. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of th	<u></u>
new registered agent and/or the new registered office address	<u>ss:</u>	_
Name of New Registered Agent		
(Florida s	areet address)	
New Registered Office Address:	. Florida	2
new regimered office rudiress.	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered Ager hereby accept the appointment as registered agent. I am familian		position
	, , , ,	,
	40	
Signature of New	Registered Agent, if changing	
heck if applicable		
The amendment(s) is/are being filed pursuant to s. 607.0120 (11	145 CC	

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One)	VP	Luciana Quintino De Carlos	6402 Cava Alta Drive, Apt 102
1) Change			Orlando, FL 32835
Add			
Remove			
2) Change			
Add			<u> </u>
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

, , , , , , , , , , , , , , , , ,	ing additional Ar neets, if necessary).	(Be specific)				
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f an amandmant u	maridae Com am ano	ahamma waaluwaifi				
provisions for imp	lementing the am	endment if not c	cation, or cancer ontained in the a	lation of issued sha	res,	
(if not applicat	ble, indicate N/A)					
						
				<u>.</u>		-

August 22, 2024 _____, if other than the The date of each amendment(s) adoption: date this document was signed. August 22, 2024 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. ☐ 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 (voting group) Dated 08/22/2024 Signature FADIO VAN DERLEI DE CARLOS (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) FABIO V DE CARLOS (Typed or printed name of person signing) President (Title of person signing)

August 22, 2024

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	August 22, 2024	
Effective date if applicable:		
	(no more than 90 days after amen	dment file date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory fil Department of State's records.	ing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ 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 sufficient for approval.	cast for the amendment(s)
	approved by the shareholders through voting group for each voting group entitled to vote separately of	
"The number of votes of	ast for the amendment(s) was/were sufficient for a	pproval
by	(voting group)	"
	(voting group)	
	12212024	
Signature F	DID VANDERLEI DE CAR	LOS
(By	a director, president or other officer - if directors of	or officers have not been
	cted, by an incorporator - if in the hands of a recei	ver, trustee, or other court
арр	ointed fiduciary by that fiduciary) FABIO V DE CARLOS	
	PARIO A DE CARILOS	
	(Typed or printed name of person services) President	gning)
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·