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.

Electronic Filing Cover Sheet

(((H23000322600 3)))



H230003226003.4BCS

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

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : DOMUS GLOBAL TAX ADVISORS LLC

Account Number : I20200000162 Phone : (407)334-7001

Fax Number

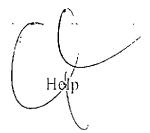
: (407)743-3888

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

Email Address: fernanda@domusglobaltax.com

## COR AMND/RESTATE/CORRECT OR O/D RESIGN POLIANA LANDIM DE SOUZA PA

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00



## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORATION:	DIM DE SOUZA PA				
DOCUMENT :	NUMBER: P22000083957					
	The enclosed Articles of Amendment and fee are submitted for filing					
Please return all	correspondence concerning this n	natter to the following:				
	FERNANDA FIGUEIRED	Ю				
	Name of Contact Person					
	DOMUS GLOBAL TAX /	ADVISORS LLC		اسے د ا		
Firm' Company				-		
15815 SHADDOCK DR STE 120				; 1		
	Address			たしてかれまって		
	WINTER GARDEN, FL 34787			, ,		
	City/ State and Zip Code					
	FERNANDA@DOMUSGI	LOBALTAX.COM				
	E-mail address: (to be	used for future annual (eport	notification)			
For further infor	rmation concerning this matter, pk	rase call:				
FERNANDA FIGUEIREDO		at (40)7	3347001 de & Daytime Telephone Number			
Name of Contact Person		Area Co	de & Daytime Telephone Number	_		
Enclosed is a ch	eck for the following amount mad	e payable to the Florida Dep	artment of State:			
S35 Filing E	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)			
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

POLIANA LANDIM DE SOUZA PA				
( <u>Name</u>	of Corporation as curren	itly filed with the Florida Dept. of State	<u>;)</u>	
P22000083957				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the	following amendment(s	
A. If amending name, enter the new n	ame of the corporation:			
N/A			71. <b></b>	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Control of the designation of the designation," "professional association,"	Torp," "Inc." or "Co".	"company," or "incorporated" or the abo A professional corporation name mus. "	breviation "Comp."	
B. Enter new principal office address,			3	
(Principal office address MUST BE A S		WINTER GARDEN, FL 34787	SSE	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			77 13 W	
		15815 SHADDOCK DR STE 120		
		WINTER GARDEN, FL 34787		
D. If amending the registered agent ar new registered agent and/or the new				
Name of New Registered Agent	N/A			
Ellow to Two Tregular Inglan	15815 SHADDOCK DR	STE 120		
	tFlorida s	trect address)		
New Registered Office Address:	WINTER GARDEN	. Florida	Elorida 34787	
	11. 11.1	(Cuy)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			osition.	
	Simple of V	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)

Example:

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 (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	POLIANA LANDIM DE SOUZA	15815 SHADDOCK DR STE 120
Add			WINTER GARDEN, FL 34787
Remove			3 SET
21 Change			
Add			
Remove 3) Change		4041-4-1-1-1-1	<u> </u>
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets if necessary) — (Be specific)		
N/A		
······································		
	. 28°	
		-
	<del></del>	خطتندین طالاند در -
		, ) ,=ध*ि
	SSC	O [] 1 [
		OH 12: 37
	72	ယ္
	<u> </u>	
	·	
F. 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)		
N/A		

 •	09/13/2023	
The date of each amendment(s date this document was signed	s) adoption:	, if other than the
•	09/13/2023	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will Department of State's records.	I 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 east for the amendment(s) e sufficient for approval.	
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast for the amendment(s) was/were sufficient for approval	~
by	(voting group)	
	(voting group)	E E
	نتي '	- "
09/13/20 Dated	023	ω
		ACT PH
Signature Po	liana Landim de Souza	FILED 2023 SEP 13 PH 12: 37
(By sele	a director, president or other officer of directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	<b>3</b> 3
	POLIANA LANDIM DE SOUZA	
	(Typed or printed name of person signing)	,
	PRESIDENT	
	(Title of person signing)	<del></del>

. ,