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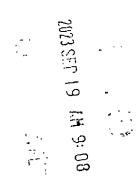
(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

N	AFROEX	USA CORP			
NAME OF CORPORA	R: P2300001	6091			
DOCUMENT NUMBER	R: 4250000 1				
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this matter to the following:					
	MILENA	A CABALLE	RO		
_	Name of Contact Person RED CONSULTING USA				
1101 BRICKELL AVE. ST 8 FLOOR					
MIAMI, FLORIDA, 33131					
	City/ State and Zip Code				
	INFO@ REDCONSULTINGUS. COM				
E-mail address: (to be used for future annual report notification)					
For further information of	oncerning this matter, pleas	se call:			
MILENA CABALLERO 11,786,489-8071					
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for th	e following amount made	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)		
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 to Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. (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: 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 MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent _ (Florida street address) New Registered Office Address: _ (City) New Registered Agent's Signature, if changing Registered Agent: 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 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 an	d 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)

Add

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.

Anke Jones, V as Remov	e, ana sai	y Smith, 55° us un Aua.	
Example: 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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>VP</u>	ENDRINGER ZURZA, TAN	
Add		ZUKZA, IAI	TIKES TERRACE,
X Remove			MIAMI LAKES,
2) Change			FL,33018
Add			
Remove 3) Change			
Add			
Remove			
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			

	al sheets, if necessary).	(Be specific)			
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	nt provides for an exc	hange, reclassification	on, or cancellation of ined in the amendm	issued shares, ent itself:	
provisions for	Implementing the ame				
provisions for	licable, indicate N/A)				
provisions for	licable, indicate N/A)				
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provisions for	licable, indicate N/A)				
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provisions for	licable, indicate N/A)				

. . .

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
date tills document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file	date)
• •	(no more man so anju ajiar amenanamyne c	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	oted by the incorporators, or board of directors without sh	areholder action and shareholder
☐ The amendment(s) was/were adopty the shareholders was/were sufficiently.	oted by the shareholders. The number of votes cast for the ficient for approval.	e amendment(s)
	oved by the shareholders through voting groups. The folioeach voting group entitled to vote separately on the amend	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated09-	13-2023 A	
Signature	1 Loutelle	
	ector, president of other officer - if directors or officers h	
	by an incorporator – if in the hands of a receiver, trustee	, or other court
арронц	d fiduciary by that fiduciary)	
	MILENA (ABALLE	RO
•	(Typed or printed name of person signing)	
	MGR	
-	(Title of person signing)	