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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: AL	7 OF NORTH .	AMERICAN CORP	
DOCUMENT NUMBER: P230000			
The enclosed Articles of Amendmen		bmitted for filing.	
Please return all correspondence cor	cerning this ma	atter to the following:	
ANDRE LUI	Z CABRAL DI	E AMORIM	
		Name of Contact Person	1
AL7 OF NOF	RTH AMERICA	AN CORP	
		Firm/ Company	* ** ***
17582 LAKE	STAR RD		
		Address	
WINTER GA	RDEN, FL 347	187	
		City/ State and Zip Code	c
CONTATO@	BT7PARTNEI	RS.COM	
E-mail a	ddress: (to be u	sed for future annual report	notification)
For further information concerning t	his matter, plea	se call;	
LUIS GONCALVES		at (407	371-5600
Name of Contact Per	son		de & Daytime Telephone Number
Enclosed is a check for the following	g amount made	payable to the Florida Depa	artment of State:
<del>-</del>	5 Filing Fee & cate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		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 of

AL7 OF NORTH AMERICAN CORP

(Name of Corporation as cu	<u>rrently filed with the Florida Dept</u>	. of State)
P23000031313		
(Document Nur	mber of Corporation (if known)	-
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	s, this <i>Florida Profit Corporation</i> ad	lopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion:	
AL7 OF NORTH AMERICA CORP		The new
name must be distinguishable and contain the word "corporatio" Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	o". A professional corporation no	or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	)	
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		ne of the
new registered agent and/or the new registered office ac	ddress:	
Name of New Registered Agent		<del></del>
(Flo	rida street address)	
New Registered Office Address:	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan Signature of		
•	0 3 7 8 8	<b>4D</b> 23 33
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120	0 (11) (e), F.S.	

STATE OF STATE

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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		-	
Add			
Remove Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change			
Add			- <del></del>
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change		_	
Add			
Remove			¢D

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If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
	····	
		<del> </del>
		<u>-</u>
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
7-2-7-		
		GD.
		an

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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		<del>, ,</del>
	(no more than 90 days after amendment file	date)
<b>Note:</b> If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing require epartment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sh	nareholder action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for thufficient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The fol r each voting group entitled to vote separately on the amen	
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by	<u>,</u> "	
•	(voting group)	
DatedSignature	R 29th, 2024	
selecte	firector, president or other officer – if directors or officers led, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	have not been c, or other court
	ANDRE LUIZ CABRAL DE AMORIM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del>,</del>