## P2300053279

(Re	equestor's Name)	)
(Ad	idress)	
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(Cit	ty/State/Zip/Phon	
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PICK-UP	☐ WAIT	MAIL
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(DO	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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		J. HORNE
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	INTERNATIO	NAL ALLIANCI	E CORP.	
DOCUMENT NUMBER:	P230000532	79		
The enclosed Articles of Amenda	nent and fee are su	bmitted for filing	<u>.</u>	
Please return all correspondence of	concerning this mat	tter to the followi	ing:	
	MICHAE	EL FIGUEROA		
	INTERN	Name of Cont		
	INTERN	ATIONAL ALL		ORP.
		Firm/ Cor	• •	
		P.O. BOX 7	72262	
		Addre		
	OR	RLANDO, FLOF	RIDA 328	377
		City/ State and	l Zip Code	:
	internat	ionalallianceco	rp@yah	oo.com
E-mai	l address: (to be us	ed for future ann	ual report	notification)
For further information concernin	g this matter, pleas	se call:	862	208-9935
Name of Contact F	Person	4′ (	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the follow	ing amount made p	payable to the Flo	orida Depa	artment of State:
	.75 Filing Fee & ificate of Status	S43.75 Filing Certified Cop (Additional co enclosed)	ny	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Sec Division of Con P.O. Box 6327 Tallahassee, FL	ction porations		Amend Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee l. Monroe Street, Suite 810 ssee, FL 32303

## **Articles of Amendment** to

## Articles of Incorporation

Articles of Incorporation of	2300/12
INTERNATIONAL ALLIANCE CORP	MA
(Name of Corporation as currently filed with the Fl	orida Dept. of State) 50
P23000053279	
(Document Number of Corporation (if k	nown)

(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(	
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	'company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	13956 OSPREY LINKS ROAD	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	SUITE# 55	
	ORLANDO, FLORIDA 32837	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 772262	
	ORLANDO, FLORIDA 32877	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  Name of New Registered Agent	lress in Florida, enter the name of the s:	
(Florida st	reet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
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 K	Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

ending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and ress of each Officer and/or Director being added:

.ttach 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.

Example:

X Change	<u>PT</u> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	SV Sa	lly Smith	
Type of Action (Check One)	Title	Name  A VA NA STVI ES HEATE L. C.	<u>Addres</u> s
l) Change	Officer	AYANA STYLES USA, L.L.C.	P.O. BOX 772262
XX Add			ORLANDO, FLORIDA 32877
Remove			
2) Change	Officer	M-N PERFORMANCE L.L.C.	P.O. BOX 772262
XX Add			ORLANDO, FLORIDA 32877
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
•	
	-
<u> </u>	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment f	île date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requestrment of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	nted by the incorporators, or board of directors without	t shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	nted by the shareholders. The number of votes cast for ficient for approval.	r the amendment(s)
	oved by the shareholders through voting groups. The ach voting group entitled to vote separately on the an	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated 10.13.		
selected	ector, president or other officer - if directors or officer by an incorporator - if in the hands of a receiver, trus	rs have not been tee, or other court
appointe	d fiduciary by that fiduciary)	
	MICHAEL FIGUEROA	
-	(Typed or printed name of person signing)	
	CEO	
-	(Title of person signing)	