P23000061841

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Saint Paulo Distrib	ution Inc		
	MBER: P23000061841			
	es of Amendment and fee are su	bmitted for filing.		
Please return all cor	respondence concerning this ma	tter to the following:		
	Leonard Titone MBA, CPA			
	-	Name of Contact Person	1	
	CPA Tax Advisors Inc.			
		Firm/ Company		
	12995 S Cleveland Ave Ste 1	60		
		Address		
	Fort Myers, FL 33907			
		City/ State and Zip Cod	e	
	admin@cpataxadvisors.net			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informat	tion concerning this matter, plea	se call:		gran Gill
Leonard Titone		at (740-1040	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	317.
	Lailing Address mendment Section		Address Iment Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Saint Paulo Distribution Inc		
(Name of Corporation as curre	ntly filed with the Florida Dept.	of State)
P23000061841		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation add	opts the following amendment(
A. If amending name, enter the new name of the corporation:		
NA		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	A professional corporation na	
B. Enter new principal office address, if applicable:	NA	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA	
	NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
	NA	
	NA	7. 25
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office addresses		e of the
NΔ	<u>:35:</u>	5.
Name of New Registered Agent		
NA		
NA	street address)	NA THE
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: r with and accept the obligations	of the position.
NA		
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 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.

Example:

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	VP	Jose Feital	1281 Cypress Cape Circle 245
Add			Fort Myers, FL 33955
Remove 2) X Change	P	Rodrigo Palomares	309 SW 26th Ave
Add			Cape Coral, FL 33991
Remove 3) Change	VP	Samuel Barroso	Cape Coral, FL 33914
Add			\$ 23 E
Remove			
4) Change		_	
Add			-
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
NA			
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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:	1,	3	
(if not applicable, indicate N/A)	- : - :	E.	•
NA		- - - -	
	 . <u>.</u> .	- ∃:	
	7.116	: 52 	
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The date of each amendment(s) late this document was signed.) adoption:	, if other than the
Effective date <u>if applicable</u> :		
-	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi locument's effective date on the	s block does not meet the applicable statutory filing requirements, this date w Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a section was not required.	adopted by the incorporators, or board of directors without shareholder action an	d shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
'The number of votes co	ast for the amendment(s) was/were sufficient for approval	
hy	,	
	(voting group)	
9/8/2023 Dated		
Signature)	a director, president or other officer - if directors or officers have not been	_ _
selo	cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	Rodrigo Palomares	-
	(Typed or printed name of person signing)	
	President	· - 5
Œ.	(l'itle of person signing)	
•		·