P24000012146

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COVER LETTER

TO: Amendment Section Division of Corporations SZ International Group Corp NAME OF CORPORATION: P24000012146 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Freddy M Rojas Name of Contact Person SZ International Group Corp. Firm/ Company 1600 SW 1st Ave apt 505 Address Miami, Florida 33129 City/ State and Zip Code Freddy_manuel@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Freddy M Rojas Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☑\$43.75 Filing Fee & ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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 of

SZ INTERNATIONAL GROUP CORP

name must be distinguishable and contain the word "corporation." "company," or "incorporated" or "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation nam "chartered," "professional association," or the abbreviation "P.A." 1600 sw 1st ave apt 505 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) miami Florida 33129	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adojits Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation nam "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)	
A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation." "company," or "incorporated" or "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation nam "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)	
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation nam "chartered," "professional association," or the abbreviation "P.A." 1600 sw 1st ave apt 505 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)	pts the following amendment(s) to
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation nan "chartered," "professional association," or the abbreviation "P.A." 1600 sw 1st ave apt 505 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)	The new
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) miami Florida 33129 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	the abbreviation "Corp.,"
(Principal office address MUST BE A STREET ADDRESS) miami Florida 33129 C. Enter new mailing address, if applicable: [600] sw 1st ave apt 505 (Mailing address MAY BE A POST OFFICE BOX)	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	····
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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:	
N/A Name of New Registered Agent	·
(Florida street address)	
N/A Nov. Raniotara d Office, Chimani	Cla-ida
New Registered Office Address: , 1 (City)	Florida (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	of the position
	9 P
Signature of New Registered Agent, if changing	
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)

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 Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	nith	
Type of Action	Title		<u>Name</u>	<u>Addres</u> s
(Check One)	CEO		Freddy M Rojas	1600 SW 1st ave
1) Change		_		apt 505
Add				Miami, Florida 33129
Remove	D		Jhosmer Anderson Cuadros	444 Brickell ave
2) Change		_		Suite P60
Add				Miami, Florida 33131
Remove 3) Change				
Add				
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)				
N/A	The specytoy			
				
<u></u>				
·				
_ _				
F. <u>If an a</u>	mendment provides for an exchange, reclassification, or cancellation of issued shares,			
prov (isions for implementing the amendment if not contained in the amendment itself: if not applicable, indicate N/A)			
N/A	, Proceedings of the control of the			
				

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:

N/A

The date of each amendment(s) add date this document was signed. _{N/A}	ption:	, if other than th
Effective date if applicable:		
nective date it applicable.	(no more than 90 days after amendn	nent file date)
Note: If the date inserted in this blo locument's effective date on the Dep		requirements, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors w	ithout shareholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes ca	ast for the amendment(s)
	oved by the shareholders through voting groups. ach voting group entitled to vote separately on to	
"The number of votes cast for	or the amendment(s) was/were sufficient for app	roval
by	(voting group)	"
06/13/2024	. 33 17	
Dated		
Signature	IIII:	
selected,	ector, president or other officer – if directors or of by an incorporator – if in the hands of a received fiduciary by that fiduciary)	officers have not been r, trustee, or other court
	FREddy M. Rojas (Typed or printed name of person sign	ı
_	(Typed or printed name of person sign	ing)
_	CEO	
_	(Title of person signing)	