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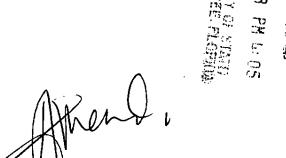
(Re	questor's Name)					
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(Cit	ty/State/Zip/Phone	= #)				
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COVER LETTER

TO: Amendment Section Division of Corpor			
NAME OF CORPOR	ATION: A & A Discount S	ervices, INC	
DOCUMENT NUMB			
	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	pondence concerning this ma	itter to the following:	
J	Diana Bomback		
_		Name of Contact Person	D .
	A & A Discount Services, Fl	E	
-		Firm/ Company	
2	2152 NE 162 ST		
-		Address	
1	NORTH MIAMI, FL 33162		
_		City/ State and Zip Cod	e
I	OCBDBA@AOL.COM		•
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
Diana Bomback		786	554-6252
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

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Articles of Amendment to Articles of Incorporation of

A & A Discount Services, INC		,	_	
(Name	of Corporation as currently file	d with the Florida Dep	t. of State)	
Н31828				
	(Document Number of Con	poration (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>Flor</i>	ida Profit Corporation &	dopts the following ame	endment(s) t
A. If amending name, enter the new n	ame of the corporation:		The	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," or "Co".	A professional corpor	ation name must conta	in the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>				
	_		5	7
C. Enter new mailing address, if apol (Mailing address MAY BE A POST				
D. If amending the registered agent an new registered agent and/or the ne		n Florida, enter the nar	ne of the	
Name of New Registered Agent	DONALD C. BOMBACK III			
	1700 NW 104 ST			
	(Florida street ac	ldress)		
New Registered Office Address:	PEMBROKE PINES		, Florida	
	(City)	1	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ind accept the obligation.	s of the position.	Marie Andrews
	Signature of New Regist	ered Agent, if changing	Logging Co.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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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 Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change	STD	David ALLEN	
Add x Remove			
2) Change	<u>v</u>	Diana Bomback	1700 NW 104 ST
X Add			PEMBROKE PINES, FL 33026
Remove 3) Change	STD	Donald Bomback III	1700 NW 104 ST
X Add			PEMBROKE PINES, FL 33026
Remove			
4) Change	· -		
Add Remove		•	
5) Change Add .			
Remove			
5)Change			
Add			
Remove			

. .

	ieets, if necessary)	. (Be specific)	nge(s) here:	•	
					
					
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<u>rgyisions for imp</u>	rovides for an exc lementing the am le, indicate N/A)	hange, reclassifi endment if not co	cation, or cancellat ontained in the am	ion of issued shares, endment itself;	
<u>rgyisions for imp</u>	<u>lementing the am</u>	hange, reclassificendment if not co	cation, or cancellat ontained in the am	ion of issued shares, andment itself:	
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<u>provisions for imp</u>	<u>lementing the am</u>	hange, reclassifi endment if not c	cation, or cancellat	ion of issued shares, endment itself;	

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The date of each a		9-13-2016 s) adoption:			, if other than th
Effective date <u>if a</u>	pplicable:	(no more than	90 days after amendment	file date)	
		nis block does not meet the app e Department of State's records.	olicable statutory filing rec	-	ll not be listed as th
Adoption of Amer	ndment(s)	(CHECK ONE)			
		adopted by the shareholders. It sufficient for approval.	he number of votes cast fo	r the amendment(s)	
		approved by the shareholders t			
"The num	ber of votes	cast for the amendment(s) was/v	vere sufficient for approval		
by		(voting group)			
		(voting group)			
The amendment action was not re		adopted by the board of directo	ers without shareholder act	on and shareholder	•
The amendment action was not r		adopted by the incorporators w	ithout shareholder action a	nd shareholder	
F	9-13-2 Dated	016			
5	Signature	Diana L. E	Bomlack		
	scl	o director, president or other of ected, by an incorporator — if in cointed fiduciary by that fiducian	the hands of a receiver, tru		
		Diana L. Bomback			
		(Typed or printe	d name of person signing)	· · · · · · · · · · · · · · · · · · ·	
		Vice President			
		(Titl	e of person signing)		

FEDEX OFFICE

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