F19000001035

(Requestor's Name)				
(4.1)				
(Address)				
(Address)				
(
(City/State/Zip/Phone #)				
☐ PICK-UP ☐ WAIT ☐ MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to Filling Smeet.				
Office Use Only				
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SECRETARY OF STATE ALL ARASSEE, FLORIDA

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COVER LETTER

TO: Amendment Se Division of Cor	
SUBJECT: PY	SM Services INC. USA
DOCUMENT NUMB	ER: F19000001035
The enclosed <i>Affidavit</i> submitted for filing.	by Foreign Corporation to Change/Add Officer(s) and/or Director(s) and fee are
Please return all corres	pondence concerning this matter to the following:
P9+r1	CK CONNEY
i	
701 Wat	Services INC. USA Firm/Company er Ford Way #450 Address
Miami	F1. 3312 6 /State and Zip Code
Patrick . (E-mail address: (10	Conner annual report notification)
For further information	n concerning this matter, please call:
Patrick Name of Cont	Conner at 305, 588.7208 Area Code & Daytime Telephone Number
Enclosed is a check ma	ade payable to the Florida Department of State for the following amount:
□\$35.00 Filing Fee	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
Mailing Addre Amendment So Division of Co P.O. Box 6327	ection Amendment Section rporations Division of Corporations
Tallahassee, FI	. 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(<u>No</u>	ne: Applicable only during the first	calendar year of qualification)
	oreign corporation as it appears on ServiceS IN	the records of the Florida Department of State is:
2. This entity was au	withorized to transact business in Flom $90000/035$	orida on $3/01/19$ and its Florida document
3. This corporation w	vas formed under the laws of	daware
4. The name and ado	dress of each officer and/or director	is as follows:
Title:		Name and Address Diana Sirila 701 Water ford way
* Please rem	10V C-X	#450 By Miami Fl. 33/2/8
		SSEE DE
		F. Georgia D. Georgia
	Λ	
	(Attach additional pages	
	<u>70</u>	Kichard Mas, president
ichard Mas		FILING FEE \$35
Signature of an officer or div IChard Mas Typed or printed name of pers	Letter .	if necessary) Richard Mas, President Title of person signing

Make checks payable to Florida Department of State and Mail to: Division of Corporations*PO Box 6327*Tallahassee, FL 32314

CR2E127 (8/08)