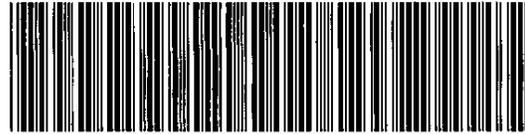


L07000092552



800184509348

(Requestor's Name)

(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:

Office Use Only

08/27/10--01025-001 **25.00

FILED
10 AUG 27 AM 10: 57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan AUG 30 2010

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: USA ENTERPRISE GENERAL SERVICES LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARCO REIS

Name of Person

USA TAX CORPORATION

Firm/Company

591 E. SAMPLE RD

Address

POMPANO BEACH, FL 33064

City/State and Zip Code

SIMONE.USA@LIVE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCO REIS

Name of Person

at (**954**)

788-1818

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
10 AUG 27 AM 10: 57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

USA ENTERPRISE GENERAL SERVICES, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/10/2007 and assigned Florida document number L0700092552.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

PLANETBIZ TRADING, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1845 S. DIXIE HWY

(Principal office address MUST BE A STREET ADDRESS)

POMPANO BEACH, FL 33060-8939

Enter new mailing address, if applicable:

1845 S. DIXIE HWY

(Mailing address MAY BE A POST OFFICE BOX)

POMPANO BEACH, FL 33060-8939

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

1845 S. DIXIE HWY

Enter Florida street address

POMPANO BEACH

Florida

33060-8939

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FILED
 10 AUG 27 AM 10:57
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated AUGUST 23RD, 2010.

Goulardins

Signature of a member or authorized representative of a member

SIMONE SERGIO GOULARDINS

Typed or printed name of signee