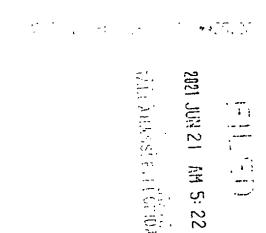
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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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COVER LETTER

TO:

Registration Section

Division of	Corporations							
	ERVICECORP, LLC							
SUBJECT: Name of Limited Liability Company								
The enclosed Article	s of Amendment and fee(s) are sul	binitted for filing.						
Please return all corr	espondence concerning this matter	r to the following:						
	Bettina Tran Esq.							
		Name of Person						
	Voight, PA							
		Firm/Company						
	7680 UNIVERSAL BLV	D. STE 565						
		Address						
	ORLANDO, FL 32819							
		City/State and Zip Code						
	bettina@myvoight.com	tto be used for future annual report no	utilication)					
For further informati	on concerning this matter, please of							
Bettina Tran		407 477-4559						
Na	me of Person	at () Area Code ——Dayti	me Telephone Number					
Enclosed is a check t	or the following amount:							
■ \$25.00 Filing Fe	e □ \$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)					
<u>Mailing Ad</u> Registrati	dress: on Section	Street Address: Registration S	ection					
Division of Corporations		Division of Co	orporations					
P.O. Box Tallahasse	6327 se. F1, 32314	The Centre of 2415 N. Monr	oe Street, Suite 810					

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

USASERVICECORP. LLC

(Name of the Limited Liability Company as fraw appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/17/2020 and assigned Florida document number 120000394308

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC".

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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 605, 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

Enter Florida street address

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	EMANON INVESTMENTS, LLC	7680 UNIVERSAL BLVD, STE 565	□Add
		ORLANDO, FL 32819	≡ Remove
			□Change
MGR	INTERNATIONAL ACQUISITION COMPANY, LLC	7680 UNIVERSAL BLVD, STE 565	= Add
		ORLANDO, FL 32819	🗆 Remove
			[] Change
			
			Remove
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ecord specifies a delayed effective is filed.	date, but not	an effective t	ime, at 12:01	a.m. on the ear	lier of: (b)	The 90	ih day afte	r the
ted	,	2021						
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Filing Fee: \$25.00