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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION:A & L (1995)USA	A INC		
DOCUMENT NUMBI	D 0000001£140			
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
		ANANDA KOGGALA		
_		Name of Contact Person)	
A & L (1		A & L (1995) USA INC		
	Firm/ Company			
_	4521 S.O	RANGE BLOSSOM TRA	IL .	
		Address		
_		KISSIMMEE FL 34746		
		City/ State and Zip Code	e	
	SUBA	ATHIE@YAHOO.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
ANANDA	KOGGALA	at (321	3689185	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	ortment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ng Address		Address	
	idment Section ion of Corporations	Amendment Section Division of Corporations		
	Rox 6327	Division of Corporations Cliffon Building		

2661 Executive Center Circle Tallahassee, FL 32301

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Articles of Amendment Articles of Incorporation of

Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation: A. If amending name, enter the new name of the corporation:	of Corporation (if know	n)	
(Document Number Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation: A. If amending name, enter the new name of the corporation:	of Corporation (if know		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation: A. If amending name, enter the new name of the corporation:	•		
its Articles of Incorporation: A. If amending name, enter the new name of the corporation:	is <i>Florida Profit Corpor</i>	ation adopts the following amend	
			iment(s) to
N/A		The n	1 <i>0</i> 14'
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional	incorporated" or the abbreviat	ion
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	SAME AS ABOVE	3	-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS ABOVE	3	-
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent		the name of the	
4521 S.O	RANGE BLOSSOM TR	AIL	
·	street address)		
New Registered Office Address: KISS	SIMMEE	, Florida	_
New Registered Agent's Signature, if changing Registered Agen	(City)	(Zip Code)	
I hereby accept the appointment as registered agent. I am familian	r with and accept the obl	igations of the position.	
Signature of New	Registered Agent, if cha		
		T) TT	

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	PT	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	LESHNIE HETTIGODAGE	454521 S.ORSNGE BLOSSOM TE
Add X Remove			KISSIMMEE FL 34746
2) Change	P	ANANDA KOGGALA	4521 S.ORANGE BLOSSOM TRA
X Add			KISSIMMEE FL 34746
Remove			
3) Change	,		
Add			
Remove			word or the American
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

N/A	

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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and the amendment itself:
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The date of each amendment(s) add	intion:	9/16	2016	, if other than the
date this document was signed.				, if other than the
Effective date <u>if applicable</u> :				
	(no more than	90 days after ai	nendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep		licable statutory	filing requirements, th	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were adop by the shareholders was/were suff		he number of vo	tes cast for the amendr	nent(s)
The amendment(s) was/were appro- must be separately provided for e				
"The number of votes cast fo	• •		• •	
by	(voting group)		.,,	
	(voting group)			
☐ The amendment(s) was/were adop action was not required.	ted by the board of directo	rs without share	holder action and share	holder
The amendment(s) was/were adop action was not required.	ted by the incorporators wi	ithout shareholde	er action and sharehold	er
Dated	7/16/2016			
Signature				
, ·	ector, president or other of by an incorporator – if in (
	d fiduciary by that fiduciar			
_	(Typed or printe	nanda	Koggalo)
	(Typed or printe	d name of person	n signing)	
	P _Y	csiden	t	
	J(Title	e of person signi	ng)	