P00000103184

(Request	or's Name)	
(Address		
(Address		
(City/Stat	e/Zip/Phone #)	
PICK-UP] WAIT	MAIL
(Business	s Entity Name)	
(Docume	nt Number)	
Certified Copies	Certificates of S	Status
Special Instructions to Filing	Officer:	

Office Use Only



300302493433

08/16/17--01021--005 *+52.50

SECTIONS TO LET A SECTIONS SECTIONS SECTIONS

amend/ marine change

AUG 2 2 2017

COVER LETTER

Division of Corporations
NAME OF CORPORATION: USA Shuffle and Limo Service INC DOCUMENT NUMBER: POOCOOIC3/84
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Tean-Pierre, Anson Name of Contact Person
Firm/ Company
511 NE 175 TERR
North Miani 84,72. 33162 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ANSON Jean-Pierre at (305) 904-2877 Name of Contact Person Area Code & Daytime Telephone Number
reaction contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate Opy Certificate of Status

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

(Additional copy is

enclosed)

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(Additional Copy is enclosed)

17 MICH OF STATES

Articles of Amendment

to

Articles of	Incorporation
-------------	---------------

1	of	porucion	
USA Shuttle		Service INC	
		meg with the trouda tept. of State	,
P 00000103	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this FI	orida Profit Corporation adopts the t	following amendment(s) to
A. If amending name, enter the new name MSA All LUXUIZ name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	VITANSDOT in the word "corporation, ion "Corp," "Inc," or "Co	o". A professional corporation nam	TNC The new r the abbreviation e must contain the
B. Enter new principal office address, if	applicable:		
(Principal office address MUST BE A STR	EET ADDRESS)		200
			
C. Enter new mailing address, if applica			57 (27)
(Mailing address <u>MAY BE A POST OF</u>	FICE BOX)		
			ラーデ
D. If amending the registered agent and/		is in Florida, enter the name of the	
new registered agent and/or the new i		1, 1 - 2	
Name of New Registered Agent	Brunswed	K A. Jean rie	rre
_	540 NW (Florida stree	KA. Jenn Pie 165 St RD # 3	505B
New Registered ()ffice Address:	Mia	m/, Florida	33169
regimered vyjree //dd/elia.	(C	ity)	(Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as registers		th and accout the obligations of the ne	reitian
т негеоу иссерт те арронитет из гедімег	a agent. Tam jaminar wil	н ини иссерство отпушноть од те ро	mum.
\mathcal{D}	TA)		
_2	4. J.		
- 7	Signature of New Reg	gistered Agent, if changing	

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> <u>Jol</u>	hn Doc	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
_X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) X Change	600	Brunsweck ANSON Jean-Pierre	3880 Lancewood Dr
Add		ANSON Jean-Pierre	<u> </u>
Remove			33065
2) Change	Regist Ag	ent Brunsweck	540 NW 165 ST RD
<u>_</u> Х. Add		ent Brunsweck Anson Jean-Pierre	4 3053
Remove			Miami, PZ 33169
3) Change			//
Ł Add			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
	<u> </u>
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis and analysis and an analysis analysis and an analysis and an analysis analysis and an analysis
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and and an and an and an
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an and an
provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and and an and an
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: US/11/17	
Effective date <u>if applicable</u> : \(\mathbb{C}\begin{align*} \lambda \lefta \rightarrow \lefta \rightarrow \lefta \rightarrow \lefta \rightarrow \rightarrow \lefta \rightarrow	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date widocument's effective date on the Department of State's records.	If not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by" (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder	
action was not required.	
Dated OS ////> Signature	
(By a)director, president or other officer – if directors or officers have not been	
selected/by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
- Kroslden F	
(Title of person signing)	