PO20000 15285

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C. GOLDEN FEB 1 6 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CL USA INC.				
DOCUMENT NUMBER: P02000015285				
The enclosed Articles of Amendment and fee are su	abmitted for filing.			
Please return all correspondence concerning this man	itter to the following:			
Stephen J. Kolski				
	Name of Contact Person			
Stephen J Kolski & Associates, PA				
	Firm/ Company			
2020 Ponce De Leon Blvd., Suite 905A				
Address				
Coral Gables, FL 33134				
City/ State and Zip Code				
	only state and hip code			
stevekolski@skolskilaw.com	_			
E-mail address: (to be us	sed for future annual report notification)			
For further information concerning this matter, pleas	se call:			
Stephen J. Kolski	305 371-9576			
Name of Contact Person	at (305) 371-9576 Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made p	payable to the Florida Department of State:			
\$35 Filing Fee \$\Bigcup \text{S43.75 Filing Fee & Certificate of Status}	Certified Copy (Additional copy is enclosed) \$\sum_{\$52.50\$ Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2019 FEB 11 AM 11: 13

CL USA INC.			,	. 5.5
(Name of Corporat	ion as currently	filed with the Florida	Dept. of State)	-LAHASSEL
P02000015285				
(Docu	ment Number of (Corporation (if known)		<u> </u>
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	la Statutes, this Fi	orida Profit Corporat	ion adopts the follow	ving amendment(s
A. If amending name, enter the new name of the c	orporation:			
				The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "Co	o". A professional co	corporated" or the prporation name mu	abbreviation
B. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET AD</u>				
				
				· _
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>2X</u>)			
If amending the registered agent and/or registered new registered agent and/or the new registered	red office addres office address:	s in Florida, enter th	e name of the	
Name of New Registered Agent				
				
	(Florida street	address)		
New Registered Office Address:		•	T1- (4-	
New Negisterea Office Hauress.	(C	ity)	, Florida	ip Code)
ew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.	istered Agent:	h and accent the oblig	ations of the modition	
20, 2000pr me appointment to registered agent.	i am jaminur will	and accept the ootig	unons oj ine postitoi	1.
			· · · · · · · · · · · · · · · · · · ·	
Sign	ature of New Reg	istered Agent, if chang	ring	

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.

X Change	PT John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike J</u>	ones	
X Add	<u>SV</u> <u>Saliy S</u>	<u>mith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
l) Change	VP, D, S	Anthony Newman	3200 NW 67TH AVENUE
Add			BUILDING 6, SUITE 600
X Remove			MIAMI, FL 33122
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	48h		
Add			
Remove			
6) Change			
Add			
Remove			

				
				<u> </u>
			 	
			·· ·· ··	
			<u> </u>	
an amendment provides for an exchanorovisions for implementing the amend (if not applicable, indicate N/A)	ge, reclassification, c ment if not contained	or cancellation o l in the amendm	f issued shares, lent itself:	
		, , , , , , , , , , , , , , , , , , , ,		
				

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file da	ite)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the arby the shareholders was/were sufficient for approval.	mendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment	ring statement ent(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required.	shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shar action was not required.	reholder
Signature (By a director president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	e not been other court
SILVID TRAVERSO	
(Typed or printed name of person signing)	
TIRECTOR (Title of person signing)	
(The of person signing)	