## P03000/15173

(Requestor's Name)  (Address)  (Address)	9000818402	219
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	11/22/060101801	2 **35.00
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	TALLAHASSEE. FLORIDA	06 NOV 22 PM 2: 59

Office Use Only

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	FINANCIA!	SERVICES C	2
DOCUMENT NUMBER: Po 20	00 115173	·	
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
MAILD M. B (Name of	Contact Person)		
ASD FINANCIA	K SFRUICES (C) (Company)	PORP	-
2 Albambra Pla	20 - Ste 1100 Address)		
CORAL GAB (City/Stat	LES FL 33/3 te and Zip Code)	4	_
For further information concerning this matter, pl	lease call:		
MAUDA BLEVS (Name of Contact Person)	at ( <u>786</u> ) <u>552-0</u> (Area Code & Daytime Tel	091 ephone Number)	
Enclosed is a check for the following amount:			
\$35 Filing Fee \$\times \text{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)	-
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	<del>g</del>	

## Articles of Amendment to Articles of Incorporation of

ASD FINANCIAL SERVICES CORDO & -
(Name of corporation as currently filed with the Florida Dept. of State)
PO 2000115173
(Document number of corporation (if known)
Pog. 19
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation:
NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Tleas (add) the following Directors/officers
Luiz FRANCA, Director
Robinson F. SEALES, Director, Assit FINOP
(Attach additional pages if necessary)
(Filach additional pages in necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: DuGuST29, 2006
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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
(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.
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)  MALLO M. BLETS:
(Typed or printed name of person signing)
Sv Vice President / CFO (Title of person signing)

**FILING FEE: \$35**