P030000082416

(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
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(Bu	siness Entity Nai	me)
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A00789, 00614, 00671

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	PORATION SULE	ASING INTERNATIONA	L USA. INC.		
William of Cold			<u> </u>		
DOCUMENT NU	MBER:	P03000082416	<u> </u>		
The enclosed Artic	les of Amendment and fee a	are submitted for filing.			
Please return all co	rrespondence concerning th	is matter to the following:			
		IN FORSTER CSVANY			
	1	Name of Contact Person			
SULEASING INTERNATIONAL USA, INC					
		Firm/ Company			
	8930 STATE RD. 84 # 242				
Address					
	ם מי	/IE, FLORIDA 33324			
-		City/ State and Zip Code	***************************************		
	katrin@t	ftaaconsulting.com			
	E-mail address: (to be use	ed for future annual report notification)			
For further informa	tion concerning this matter,	please call:			
KA	TRIN FORSTER	at (954)	6320922		
Name	of Contact Person	Area Code & Daytime To	elephone Number		
Enclosed is a check	for the following amount n	nade payable to the Florida Depa	rtment 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)		
Mailing Address		Street Address			
Amendment Section		Amendment Section			
Division of Corporations		•	Division of Corporations		
P.O. Box 6327- Tallahassee FL 32314			Clifton Building 2661 Executive Center Circle		
Tallahassee, FL 32314		2661 Executive Center Circ	2661 Executive Center Circle		

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 6, 2010

Katrin Forster Csvany Suleasing International USA, Inc. 8930 State Rd 84 #242 Davie, FL 33324

SUBJECT: SULEASING INTERNATIONAL USA, INC

Ref. Number: P03000082416

We have received your document for SULEASING INTERNATIONAL USA, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey Regulatory Specialist II

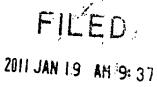
Letter Number: 610A00028258

RECEIVED

11 JAN 19 AM 6: 44

SECRETARIES FORDA

Articles of Amendment to **Articles of Incorporation** of



SULEASING INTERNATIONAL USA, INC

SULEASING INTERNATIONAL USA, INC SECRETARY OF STATE (Name of Corporation as currently filed with the Florida Dept. of State HASSEE, FLORIDA P03000082416

1 0300002410		THE RESERVE THE PROPERTY OF TH
(Document Number of Corpora	tion (if kno	wn)
Pursuant to the provisions of section 607,1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this F	Torida Profit Corporation adopts the follo
A. If amending name, enter the new name of the corporation	on:	
		The new
name must be distinguishable and contain the word "cor abbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional assoc.	orp," "Inc	c," or "Co". A professional corporation :
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u> </u>	
C. Enter new matters address if amiliables		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office as		in Florida, enter the name of the
new registered agent animal the new registered office ac	141 (33.	
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
		_
New Registered Office Address: (Flo.	rida strect	address)
		, Florida
(City)	(Zip Code)
Ni Di tanala and Sinana if daning Desimand	A	
New Registered Agent's Signature, if changing Registered . Thereby accept the appointment as registered agent. I am fan		and accept the obligations of the position.
, ,,		· · · · · · · · · · · · · · · · · · ·
Signature of New	e Ragistor	al 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)

Title ()	Name .	<u>Address</u>	Type of Action
P	Gomez, Francisco	8930 SR 84 # 242 Davie_FL 33324	
P	Pelaez, Sergio	8930 SR 84 # 242 Davie, Et 33324	☑ Add
			Add
	ling or adding additional Articles, e lditional sheets, if necessary).— (Be s		
<u>provisic</u>	nendment provides for an exchange ons for implementing the amendment of applicable, indicate N/A)	, reclassification, or cancellation at if not contained in the amend	n of issued shares, ment itself:

The date of each amendment(s	adoption: October 29 of 2010
•	(date of adoption is required)
Effective date if applicable:	
(no more than 90 days after amendment file date)
• • • •	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	
	coting group)
✓ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 11/29/	
(By a selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
_	Douglas Linares
	(Typed or printed name of person signing)
_	Treasurer
	(Title of person signing)