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(Re	equestor's Name)		
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PICK-UP	☐ WAIT	MAIL.	
(Bu	isiness Entity Nam	e)	
(Do	ocument Number)		
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FEB 1.1.2016 CLEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AAA Rousse Services, Inc.			
DOCUMENT NUME	P07000102490		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Robert J Hindes		
•		Name of Contact Person	
	AAA Rousse Services ,Inc.		
•		Firm/ Company	
	11296 Oakridge Trail	· · · · · · · · · · · · · · · · · · ·	
•		Address	
	Seminole, FL 33772		
•		City/ State and Zip Code	
rhinde	es@tampabay.rr.com		
		sed for future annual report	notification)
	is-man address. (to be us	sed for future annual report	nounceston)
For further information	concerning this matter, pleas	se call:	
Robert J Hindes		at (⁷²⁷	399-1899
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	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)
Ame Divis P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to

Articles of Incorporation

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

16 FEB -8 AM 8: 28 Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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.

X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	С	Miglena B Hindes	11296 Oakridge Trail	
X Add			Seminole, FL 33772	
Remove				
2) Change	С	Stephanie L Hindes	11296 Oakridge Trail	
X Add			Seminole, FL 33772	
Remove				
3) Change	<u>C</u>	Robert A Hindes	11296 Oakridge Trail	
X Add			Seminole, FL 33772	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		 		
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
Α	

The date of each amendment(s) adoption:	<u>case fit</u> , if other than the
date this document was signed.	SEORE TARY OF SUITE BIVISION OF BREEK BIVISION OF CORPOR AND A
Effective date if applicable:	
(no mo	re than 90 days after amendment file date) 16 FEB - 8 AM 8: 28
Note: If the date inserted in this block does not meet document's effective date on the Department of State's re	the applicable statutory filing requirements, this date will not be listed as the ecords.
Adoption of Amendment(s) (CHECK O	NE)
☐ The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group en	
"The number of votes cast for the amendment(s) was/were sufficient for approval
by	27
(voting grou	<i>p)</i>
☐ The amendment(s) was/were adopted by the board of action was not required.	directors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the incorporaction was not required.	ators without shareholder action and shareholder
02/03/2016	
DatedSignature	Nue
	other officer – if directors or officers have not been
appointed fiduciary by that	- if in the hands of a receiver, trustee, or other court fiduciary)
Robert J Hindes	
(Typed o	r printed name of person signing)
President	
	(Title of person signing)