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JUN 1 8 2019 C Kinsey

COVER LETTER

TO: Amendment Section Division of Corporations

USA Grading Inc NAME OF CORPORATION:	
P08000024733 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing	ng
·	
Please return all correspondence concerning this matter to the follow	wing:
James England	
(Name of Co	ntact Person)
USA Grading Inc	
(Firm/ C	ompany)
886 Park Ave Suite 203	
(Add	lress)
Marco island, Florida 34145	
(City/ State a	nd Zip Code)
hengland07@gmail.com	
E-mail address: (to be used for future and	nual report notification)
For further information concerning this matter, please call:	
JH England	239 571-9792
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the F	Florida Department of State:
S35 Filing Fee U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certified C (Additional enclosed)	Copy Certificate of Status L copy is Certified Copy
Mailing Address	Street Address Amendment Section
Amendment Section Division of Corporations	Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

USA Grading Inc						
(Name of Corporation a	s currently	y filed wit	h the Floric	la Dept. of State)		
P08000024733						
(Docume	nt Number	of Corpor	ation (if kno	own)		
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	da Statutes.	this <i>Flori</i>	da Not For	Profit Corporation	adopts the	following
A. If amending name, enter the new name of the c	corporation	<u>1:</u>				
N/A						The new
name must be distinguishable and contain the word " "Company" or "Co," may not be used in the name.	-		corporated"	or the abbreviation	on "Corp." o	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD	<u>le:</u> _	N/A				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>-</u> <u>OX</u>)	N/A			TAL	2019
					LAHAS	2019 JUN = 3
 If amending the registered agent and/or registered new registered agent and/or the new registered 			n Florida, e	nter the name of t	ine Som	AH
	N/A					89
					rri	00
New Registered Office Address:			(Flor	ida street address)	<u> </u>	
				, Flori	ida	
_		(City)			p Code)	
New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.			and accept th	we obligations of th	e position.	
	Sigi	nature of l	Vew Register	red 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.

Example: X Change X Remove X Add	\underline{V} Mik	n Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Randy N Henry	1050 San Marco Road
X Add			Marco Island
Remove			Florida 34145
2) Change			
Add			
Remove			
3)Change	<u></u>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
N/A					
	•				
	· ·				

	e date of each amendment(s) ado	otion:	, if other than the
date	e this document was signed.		
Eff	ective date if applicable:		
		(no more than 90 days after amendment file date)	
	ee: If the date inserted in this block ument's effective date on the Department.	does not meet the applicable statutory filing requirements, this date will not ment of State's records.	not be listed as the
Ade	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	
	There are no members or membe adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were	
	Dated	5/28/19	
		an or vice chairman of the board, president or other officer-if directors	
	have not been	selected, by an incorporator - if in the hands of a receiver, trustee, or	
	other court ap	pointed fiduciary by that fiduciary)	
		Domenia m. Catalano	
		(Typed or printed name of person signing)	
		Pusident (Title of person signing)	
		(Title of person signing)	