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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	- #\
(Oil	y/Otato/Zip/i florit	<i>- 11)</i>
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

(1-1) 9 5 11

COVER LETTER

TO: Amendment Section Division of Corporations

SUPL NAME OF CORPORATION:	ISER-USA INC			75
DOCUMENT NUMBER:	61762			FLORIDA
The enclosed Articles of Amendment and	d fee are submitted	for filing.		
Please return all correspondence concern	ing this matter to th	e following:		
WILFREDO E	B. BOLIVAR			
SUPLISER-U		e of Contact Person	n	
7980 SW 195		Firm/ Company		
CUTLER BAY	′, FL 33157	Address		
	City	State and Zip Cod	e	
willybolivar@supli	ser-usa.com			
E-mail addres	ss: (to be used for f	uture annual report	notification)	
For further information concerning this n	natter, please call:			
Wilfredo B. Bolivar		786	704-1828	
Name of Contact Person			de & Daytime Telephone Nui	mber
Enclosed is a check for the following ame	ount made payable	to the Florida Depa	artment of State:	
□ \$35 Filing Fee	of Status Cer (Ad	3.75 Filing Fee & tified Copy ditional copy is closed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	ns	Amend Division Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SUPLISER-USA INC

(Name of Corporation as currently filed with the Fl	orida Dept. of State)	L
P08000061762	orida Dept. of State)	,
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this F	Florida Profit Corporation adopts the following amendment	nt(s) to
its Articles of Incorporation:		
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporation		
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Corp.,"		
word "chartered," "professional association," or the abbreviation "I		
B. Enter new principal office address, if applicable:	8517 NW 68th STREET	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33166	
,		
		•
C. Francisco de Silva de La Silva de Caracteria de Caracte		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(maining address MAT BE A 1031 OFFICE BOX)	•	
D. TC 31 41 14 3 4 34 14 3 600 33		
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stre	et address)	
New Registered Office Address:	. Florida	
(City)	(Zip Code)	
	, ,	
Now Bering at the Control of the Con		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		
тыстогу иссерт те арронитет из техняетей ахет. Тат jaminar w	an and accept the obligations of the position.	
Signature of New Registered A	gent, 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 Rem Example:	ove, and Sai	lly Smith, SV as an Add.	SECRETAL TO
X Change	<u>PT</u>	John Doe	مسيور لان الت
X Remove	<u>v</u>	Mike Jones	SSET O
X Add	<u>sv</u>	Sally Smith	المراجع الكلب الأثار
Type of Action (Check One)	<u>Title</u>	Name	Address Address Address
1) Change			
Add Remove			
2) Change	sv	WILFREDO B.BOLIVAR	7980 SW 195 TERRACE
Add			MIAMI, FL 33157
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

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f an amendment provides for an exchange, reclassification	, or cancellation of issued shares,
	ed in the amendment itself:
provisions for implementing the amendment if not contain	
cif not applicable, indicate N/A)	
provisions for implementing the amendment if not contain (if not applicable, indicate N/A)	
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provisions for implementing the amendment if not contain (if not applicable, indicate N/A)	

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
by the shareholders was/were suf	in Early in	
The amendment(s) was/were appropriately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	M D
by	(voting group)	
action was not required.	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder	
08/25/20 Dated	Willin Surbu	_
selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	DARWIN J. ARELLANO	
	(Typed or printed name of person signing)	_
	VICE PRESIDENT	
•	(Title of person signing)	_