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THE SECRETARY OF STATE

CM ...

COVER LETTER

Division of Corporations	
NAME OF CORPORATION: ANATRA SERVICES LINC. DOCUMENT NUMBER: P-09000062748	
The enclosed Articles of Amendment and fee are submitted for filing.	77.9
Please return all correspondence concerning this matter to the following:	ran-
CHANGY FOINTSU Jour Firm Name of Contact Person Name of Contact Person Firm/ Company Firm/ Company Address Holly Wood Fl 3302/ City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
HAN by four at 786, 218-3117 Name of Contact Person Area Code & Daytime Telephone Number	
inclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)	
Mailing Address Street Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ANA SQUICOS INC. (Name of Corporation) DOCUMENT NUMBER: PO960006 Z 748
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHANSy Point Dy our
AMIRA Services LLC (Name of Firm/Company)
5612 Hollywood BlVd
Hollywood Fl 3302/
(City/State and Zip Code) For further information concerning this matter, please call:
handy four Journal (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation APT A Sen Ces Incorporation (Name of Corporation as currently filed with the Florida Dept. of State) POSE OF ATTACHMENT OF THE SENTING OF THE SENTI
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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 MUST BE A STREET ADDRESS) + Olynood, Fl 3302
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Pombroko Piner, FC3302
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
Name of New Registered Agent Solver Holly Wood Blad (Florida streft oddress)
New Registered Office Address: HOllywood Florida 3502 (City) (Zip Code)
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.

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 <math>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	PT John Doe
X Remove	<u>V</u> <u>Mike Jones</u>
X Add	SV Sally Smith
Type of Action (Check One) 1) Change Add	P. ROSemane Fooligue 20503 NW 47AVE Miami Bordens, Fl 330
Remove 2) Change Add	P Chandy Points V four 5612 Holly wood Blvd Holly wood, FC 33021
Remove 3) Change Add	
Add	SECH 20
Change Add	LORIDA
Change Add Remove	

attach additional sheets, if necessary). (Be specific)			
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 	-		
an amendment provides for an exchange, reclassification, or cancellation of issued shares provisions for implementing the amendment if not contained in the amendment itself:	<u>s,</u>		
(if not applicable, indicate N/A)			

	other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted 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	الأطبالكون المدادات
by	res Gred
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder \$\frac{\frac{1}{2}}{2}}\$	Contraction of the Contraction o
action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	A Carrier
Dated 8 3 4 mm/llb - / D	
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)	
CHANDY foint DU four	
(Typed or printed name of person signing)	
110 Aident	