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USA TAX CORPORATION

PAGE 01/05

Division of Corporations

Page 1 of 1

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Florida Department of State
Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : USA TAX CORPORATION

Account Number : I20060000112

Phone : (954) 788-1818

Fax Number : (954) 788-6765

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COR AMND/RESTATE/CORRECT OR O/D RESIGN

M&G USA ENTERPRISE CORP

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Amend after

COVER LETTER

H05030194947 3

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: M&G USA ENTERPRISE CORP

DOCUMENT NUMBER: P09000072994

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARCO REIS

Name of Contact Person

USA TAX CORPORATION

Firm/ Company

591 E SAMPLE RD

Address

POMPANO BEACH, FL 33064

City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCO REIS

Name of Contact Person

at (954) 788-1818

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)Mailin Address

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

Street Address

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

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H0503019494/

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

M&G USA ENTERPRISE CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P09000072994

(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:

_____ The new
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)

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 the New Registered Agent:

New Registered Office Address:

_____ (Florida street address)

_____ Florida
(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.

Signature of New Registered Agent, if changing

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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)

If an

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---------------------------------|
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

ARTICLE VII THE INITIAL OFFICER(S) AND/OR DIRECTOR(S) OF THE CORPORATION :

PLEASE CORRECT THE NAME OF: MARICA C DE ALMEIDA AS PRESIDENT TO

MARCIA C DE ALMEIDA ALSO AS PRESIDENT.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 09/03/2009 officer/director If at
and address 6-5555 (date of adoption is required)

The date of each amend
and address 6-5555
If applies

Effective date if applicable: 09/03/2009
(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

by _____
(voting group)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 09/03/2009

Signature

Marcia C de Almeida

(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)

MARCIA C DE ALMEIDA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)