PONUU 18934

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
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REPARTARY OF STATE

- Common

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	A.P. USA GROUP IN	<u>C</u>
DOCUMENT NU	MBER:	P09000078934	
The enclosed Articl	les of Amendment and fee a	re submitted for filing.	
Please return all con	rrespondence concerning thi	is matter to the following:	
_		PHILIP PORTER	
A.P. U		lame of Contact Person	
		. USA GROUP INC	
	Firm/ Company		
-	5307 NW 74TH AVE		····
Address			
_	MIAMI FL 33166		
	C	ity/ State and Zip Code	
	PORTIND(E-mail address: (to be use	@BELLSOUTH.NET d for future annual report notification)	
For further informa	tion concerning this matter,	please call:	
PH	HILIP PORTER	at (305) 4	82-9743
Name	of Contact Person	Area Code & Daytime Tel	lephone Number
Enclosed is a check	for the following amount n	nade payable to the Florida Depar	tment of State:
	☐ \$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)
Mailing Address		Street Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circ	le

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

of

A.P. USA GROUP INC

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

P09000078934

(Document Number of Corporation (if known)

ZOIDFEB ZU PM 12: 25 Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "Inc,	
3. <u>Enter new principal office address, if app</u> Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable		
(Mailing address <u>MAY BE A POST OFFI</u>	<u>CE BOX</u>)	
). If amending the registered agent and/or r		Florida, enter the name of the
). If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered agent		Florida, enter the name of the
		Florida, enter the name of the
new registered agent and/or the new regis	stered office address:	
new registered agent and/or the new regis		dress)
new registered agent and/or the new regis	stered office address:	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u> </u>	GUIDO MUCARZEL	5307 NW 74TH AVE MIAMI FL 33166	
(attach ad	dditional sheets, if necessary). (Be s	specific)	
provisio	nendment provides for an exchange ons for implementing the amendment of applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: _	12/31/09
Effective date <u>if applicable</u> :	12/31/09	(date of adoption is required)
·	(no more than	90 days after amendment file date)
Adoption of Amendment(s)	(<u>C</u>	CHECK ONE)
The amendment(s) was/we by the shareholders was/w	•	he shareholders. The number of votes cast for the amendment(s) or approval.
		the shareholders through voting groups. The following statement ag group entitled to vote separately on the amendment(s):
"The number of votes	cast for the ame	endment(s) was/were sufficient for approval
by		25
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	he board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	he incorporators without shareholder action and shareholder
Dated_02/1	8/2010	
sel	ected, by an inc	ident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court by by that fiduciary)
		PHILIP PORTER
	(1)	Typed or printed name of person signing)
		VICE PRESIDENT
	(Title	of person signing)