## P090000 93504

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	: #)
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ALBERT VAN ZY RATION:	YL USA, INC	
DOCUMENT NUME	P09000093504		
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	Albert van Zyl		
		Name of Contact Perso	n
	127 Mansfield D	Firm/ Company	
	Boca Raton, FL, 33434	Address	
		City/ State and Zip Cod	e
havzp	@aol.com		
<u> </u>	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Albert van Zyl		954 at (	666 2282
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Ame Divis P.O.	ing Address ndment Section tion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ALBERT VAN ZYL USA, INC					
(Name of Corporation as currentle P09000093504	(Name of Corporation as currently filed with the Florida Dept. of State) 1909000093504				
(Document Number of	of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(				
A. If amending name, enter the new name of the corporation:					
NIA	The new				
name must be distinguishable and contain the word "corporation" (Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association." or the abbreviation "  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	"Co". A professional corporation name must contain the				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA TABLE TO				
D. If amending the registered agent and/or registered office addraw registered agent and/or the new registered office address  Name of New Registered Agent					
New Registered Office Address: NA	reet 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 w					

Signature of New Registered Agent, if changing

•			ļ
address of each Office (Attach additional she Please note the officer P = President; V = Vi Executive Officer; CF	er and/or lets, if neces director til ce President O = Chief	Director being added: ssary) tle by the first letter of the office title: nt; T= Treasurer; S= Secretary; D= Direct Financial Officer. If an officer/director ho	ch officer/director being removed and title, name, and or: TR= Trustee: C = Chairman or Clerk: CEO = Chicolds more than one title, list the first letter of each office
held. President, Treasi			
a changes should be no	ted in the fo leaves the a	Ollowing manner. Currently John Doe is lis corporation. Sally Smith is named the V and	ted as the PST and Mike Jones is listed as the V. There IS. These should be noted as John Doe, PT as a Change
Mike Jones, V as Remo		lly Smith, SV as an Add.	o. These should be noted as some boe, I T as a change
Example: X Change	DΤ	John Doo	
_	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X 1) Change	PD	Albertus J van Zyl	127 Mansfield D
Add	<del></del> _		Boca Raton, FL
<del></del>			33434
Remove			
2) Change			
Add			
Remove			
3) Change			
<u>-</u>	<del></del>		
Add			
Remove			
4) Change			
Add	<del></del>		
Remove			
Kemove			
5) Change			
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(Be specific)	
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NIA	
• 1	
	<u> </u>
nange, reclassification, or cancellation	n of issued shares,
ndment if not contained in the amend	dment itself:
· · · · · · · · · · · · · · · · · · ·	
NK	
1	<del></del>
	change, reclassification, or cancellation endment if not contained in the amen

The date of each amendment(s) ad date this document was signed.	option:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will noartment of State's records.	ot be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ador by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
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	
08/01/2019 Dated Signature (By a directed)	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)  ALBERT (Typed or printed name of person signing)	