P10000083308

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | idress) | <u> </u> |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bı | usiness Entity Nan | ne) |
| (Do | ocument Number) | <u> </u> |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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300238034113

08/03/12--01005--001 **35.00



Amend 10 8/0/12

Articles of Amendment Articles of Incorporation of



VOCEUSA CORP

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

P10000083303

dment(s) to

| F 10000003303 | | |
|--|--|--|
| (Documer | nt Number of Corporation (if known) | |
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this Florida Profit (| Corporation adopts the following amendme |
| A. If amending name, enter the new na | ame of the corporation: | |
| | | The new |
| name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | tain the word "corporation," "company, ation "Corp," "Inc," or "Co". A profes. tion," or the abbreviation "P.A." | " or "incorporated" or the abbreviation |
| B. Enter new principal office address, | if applicable: | |
| (Principal office address MUST BE A S | | |
| | | |
| | | |
| C. Enter new mailing address, if appli | | |
| (Mailing address MAY BE A POST) | OFFICE BOX) | |
| | <u></u> | |
| | | |
| | | |
| D. If amending the registered agent an new registered agent and/or the nev | d/or registered office address in Florida, w registered office address: | enter the name of the |
| _ | ORIVALDO DA SILVA | |
| Name of New Registered Agent | 20973 SPRINGS TERRAC | E |
| | | <u> </u> |
| New Registered Office Address: | (Florida street address) BOCA RATON | 33438 |
| | (City) | , Florida 33428 |
| | (City) | (Esp Coue) |
| | | |
| New Registered Agent's Signature, if c | hanging Registered Agent? | |
| I hereby accept the appointment as regist | tered agent. I am familiar/with and accept | the obligations of the position. |
| | may Dell | |
| Si | gnature of New Registered Agent, if changi | ne |

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 | n Doe | | | |
|-------------------------------|---------------------|-------------------|-----------------------|--|--|
| X Remove | <u>V</u> <u>Mik</u> | Mike Jones | | | |
| X Add | SV Sally | Sally Smith | | | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s | | |
| 1) Change | PT | MARCIA P DA SILVA | 20973 SPRINGS TERRACE | | |
| Add | | | BOCA RATON, FL 33428 | | |
| X Remove | | | | | |
| 2) Change | PT | ORIVALDO DA SILVA | 20973 SPRINGS TERRACE | | |
| X Add | | | BOCA RATON, FL 33428 | | |
| Remove | | | | | |
| 3) Change | - | | | | |
| Add | | | | | |
| Remove | | | | | |
| 4) Change | | | | | |
| Add | | | was . | | |
| Remove | | | | | |
| 5) Change | | | | | |
| Add | | | 1144 | | |
| Remove | | | | | |
| 6) Change | | | | | |
| Add | | | | | |
| Remove | | | | | |

| amending or adding additional Art attach additional sheets, if necessary). | (Be specific) | | | |
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| f an amendment provides for an exc | <u>hange, reclassification</u> | n, or cancellation | of issued share | <u>:S</u> , |
| 4 4 6 1 1 41 41 | | ined in the ameno | iment itseif: | |
| provisions for implementing the amo | endment if not conta | | | |
| provisions for implementing the amo (if not applicable, indicate N/A) | endment if not conta | | | |
| provisions for implementing the amo | endment if not conta | | | . |
| provisions for implementing the amo | endment if not conta | | | |
| provisions for implementing the amo | endment if not conta | | | - |
| provisions for implementing the amo | endment if not conta | | | |
| provisions for implementing the amo | endment if not conta | | | |
| provisions for implementing the amo | endment if not conta | | | |
| provisions for implementing the amo | endment if not conta | | | |
| provisions for implementing the amo | endment if not conta | | | |

| The date of each amendment(s) adoption: 0//2//2012 | | |
|---|---|--|
| Effective date if applicable: | | |
| (no more ti | nan 90 days after amendment file date) | |
| Adoption of Amendment(s) (CHECK ONE) | | |
| ■ The amendment(s) was/were adopted by the shareholders by the shareholders was/were sufficient for approval. | The number of votes cast for the amendment(s) | |
| ☐ The amendment(s) was/were approved by the shareholder must be separately provided for each voting group entitle | s through voting groups. The following statement ed to vote separately on the amendment(s): | |
| "The number of votes cast for the amendment(s) was | s/were sufficient for approval | |
| by(voting group) | ,, | |
| (voting group) | | |
| ☐ The amendment(s) was/were adopted by the board of direction was not required. | ctors without shareholder action and shareholder | |
| ☐ The amendment(s) was/were adopted by the incorporator action was not required. | s without shareholder action and shareholder | |
| Dated 07/27/2012 | f. / | |
| | r officer – if directors or officers have not been in the hands of a receiver, trustee, or other court ciary) | |
| ORIVALDO DA SILVA | | |
| (Typed or printed name of person signing) | | |
| PRESIDENT | | |
| (Title of r | verson signing) | |