Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190003275743)))



H190003275743ABC5

Division of Corporations Fax Number : (850)617-6380
Account Name : LEADER ASSOCIATES LLC
Account Number : I20180000056
Phone : (954)998-3963
Fax Number : (954)697-0359

NOV -6 PH 2:0

## COR AMND/RESTATE/CORRECT OR O/D RESIGN

## JALL SERVICES CORP

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

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NOV 0 7 2019

I ALBRITTON

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Corporate Filing Menu

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(((H19000327574 3)))

## COVER LETTER

TO: Amendment Section

Division of Corpor			
NAME OF CORPORA	TION: JALL SERVICE	ES CORP	
DOCUMENT NUMBE	R: P10000093167		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	4	ALINE ANDRADE OLIVE	EIRA
_		Name of Contact Person	n
		J ALL SERVICES COR	tP
_		Firm/ Company	
_		880 SPRING CIRCLE #	106
_		Address	
	Di	EERFIELD BEACH, FL 3:	3441
		City/ State and Zip Cod	e
	jaltservices2	015@gmail.com	
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
ALINE AND	RADE OLIVEIRA	at (	348-9551 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	witnent of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fiting Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Amend Divisio Clitton 2661 E	Address Iment Section on of Corporations - Building (xecutive Center Circle

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

## 2019-11-06 16:11:35 (GMT)

(((H19000327574 3)))

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:

 $P \sim President$ ;  $V \sim Vice\ President$ ;  $T \sim Treasurer$ ;  $S \sim Secretary$ ;  $D \sim Director$ ;  $TR \sim Trustee$ ;  $C \sim Chairman\ or\ Clerk$ ;  $CEO \sim Chief$ Executive Officer;  $CEO \sim Chief\ Financial\ Officer$ . If an officer/director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be 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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	OLIVEIRA NETO, JOEL ANTUNES	880 SPRING CIRCLE #106
Add			DEERFIELD BEACH, FL 33441
X Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del></del>	
Add			
Remove			
6) Change			
Add			
Remove			

2019-11-06 16:11:35 (GMT) (((FH 9000327574 3)))

(Attach	additional sheets, if necessary). (Be specific)
N/A	
•	
. <u>Han a</u> provi	mendment provides for an exchange, reclassification, or cancellation of issued shares.  sions for implementing the amendment if not contained in the amendment itself:
- (	if not applicable, indicate N/A)
N/A	

(((H19000327574 3)))

The date of each amendment date this document was signed		, if other than the
onte this document was signer.	N/A	
Effective date if applicable:	(no more than 90 days after amendment file dute)	
Note: If the date inserted in- document's effective date on t	this block does not meet the applicable statutory filing requirements, this bepartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/weby the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendme ere sufficient for approval.	nt(s)
	re approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	ement
"The number of vote:	s cast for the amendment(s) was/were sufficient for approval	
<b>b</b> y	ŗ	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	older
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	11/05/2019	-
Signature_	Q lung	
(H	By a director, president or other officer - if directors or officers have not be	
	elected, by an incorporator — if in the hands of a receiver, trustee, or other oppointed fiduciary by that fiduciary)	court
	ALINE ANDRADE OLIVEIRA	
	(Typed or printed name of person signing).	
	PRESIDENT	
	(Title of person signing)	