## P10000097333

(Re	equestor's Ñame)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
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Amend. 12-20-10 De

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	1: U. S. A S	ERVICE SOLUTI	ONS, INC.
DOCUMENT NUMBER: _\frac{7}{2}	1000009	7333	
The enclosed Articles of America	idment and fee are s	ubmitted for filing.	
Please return all correspondence	ce concerning this m	atter to the following:	
NA12	Name	-BOIR NOZ of Contact Person	
USA	SERVICE S	COLUTIONS, IN	'C .
13875	5 S.W 6	3 ST Address	
Min	Mi, FL City/S	33) 83 State and Zip Code	
Kamela E-mail	zare hoth address: (10 be used for	ail. Com. future annual report notification)	
For further information concern	ning this matter, plea	se call:	
KDMEL AZA Name of Contact Per	rz son	at (786) 470 - Area Code & Daytime Tele	5186 phone Number
Enclosed is a check for the follo	owing amount made	payable to the Florida Depart	nent of State:
\$35 Filing Fee \$43.75 Certific	Filing Fee & ate 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 Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	s	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	•

## Articles of Amendment to Articles of Incorporation

of

USA SERVICE SOL				
(Name of Corporation as currently file	d with the Florida Dept.	of State)		
P10000097333.				
(Document Number of C	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florid amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida P</i>	Profit Corporation :	adopts the follo	owing
A. If amending name, enter the new name of the cor	poration:			
ALU			The new	
name must be distinguishable and contain the word abbreviation "Corp.," "Inc.," or Co.," or the designaname must contain the word "chartered," "professional B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESSIONAL ASTREET AST	tion "Corp." "Inc," or "Classociation," or the abb	Co". A professiong	al corporation	Ŋ
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX  D. If amending the registered agent and/or registere new registered agent and/or the new registered of	d office address in Florid	la, enter the name	of the	
	NI A			
Name of New Registered Agent:	10 1 14			
New Registered Office Address:	(Florida street address)			
	NIA	, Florida		
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	am familiar with and acce	pt the obligations o	f the position.	
	MIA			
Signature	of New Registered Agent,	if changing		

## 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>VP</u>	RICARD A BORNOZ		☐ Add ■ Remove
TRE	KAMEL AZAR		☐ Add ☐ Remove
V.P.	WALDEMAR R. ALBORNOZ	13875 S.W 63 ST MIAMI, FL 33183	Add Remove
	ng or adding additional Articles, enter clitional sheets, if necessary). (Be specific	)	
	N/A		
provision	ndment provides for an exchange, reclassing the amendment if no applicable, indicate N/A)		
	- 13 IA -		

The date of each amendment(s)	adoption: 12   9   10
•	(date of adoption is required)
Effective date if applicable: (no	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were as by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or 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	<u> </u>
(vo	oting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder
selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)
_	(Typed or printed name of person signing)  INCORPURATOR PRESIDENT.  (Title of person signing)