PICCO	04399
(Requestor's Name) (Address) (Address)	100315585951
(City/State/Zip/Phone #)	07/13/1801021006 ++35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 18 JUL 13 PH ALLAHASSEE, FI
	JUL 1 6 2018 S. YOUNG

Office Use Only

COVER LETTER

TO: Amendment Section Division of Corporations

. :

NAME OF CORPORATION: _____

DOCUMENT NUMBER: P11000004379

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elizabeth Sandoval at (954) 648-1571 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status S43.75 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 Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Street Address

Articles of Amendment to Articles of Incorporation of

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

ASUNCA INC

. .

	P110000043	79
· · ·	(Document Number o	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 amendment(s) to
A. If amending name, enter the new na	ume of the corporation:	
name must he distinguishable and con- "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "	The _new
B. <u>Enter new principal office address</u> , (Principal office address <u>MUST BE A S</u>		N/A
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		THE THE THE
		N/A SEE D
D. <u>If amending the registered agent an</u> new registered agent and/or the new		
Name of New Registered Agent	GLADES BUSINESS SE	
	1825 MAIN STREET SU	
	(Florida st	reet address)
New Registered Office Address:	WESTON	
		(City) (Zip Code)
<u>New Registered Agent's Signature, if c</u> I hereby accept the appointment as regist	ered agent. A a m familiar	t: with and accept the obligations of the position. 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)

Example:

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 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.

X Change \mathbf{PT} John Doe X Remove \underline{V} Mike Jones <u>X</u> Add SV Sally Smith Type of Action Title <u>Name</u> Address (Check One) P.S Glades Corporate Services, LLC 1940 Wilson Street 1) ____ Change Hollywood, FL 33020 Add Х Remove P.S Glades Business Services, LLC 1825 Main Street, Suite # 8 2) ____ Change Х Weston, FI 33326 Add Remove 3) ____ Change ____ Add ____ Remove 4) ____ Change ___ Add _ Remove 5) Change ____ Add Remove 6) ____ Change ___ Add ___ Remove

	•

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (Attach *additional sheets, if necessary).* (Be specific)

N/A

	-
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
N/A	

	07/05/2018	
The date of each amendment(s) a date this document was signed.	adoption:	, if other than th
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad	opted by the incorporators without shareholder action and shareholder	
action was not required.		
07/05/201	s III	
Dated		
Signature		
(By a	director, president or other officer - if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court – inted fiduciary by that fiduciary)	
uhbo:		
	Elizabeth Sandoval By Glades Business Services, its Manager	
	(Typed or printed name of person signing)	
	President of ASUNCA, INC	
	(Title of person signing)	