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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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SEETING ARY OF STARE
TALLAHASSEE, FLORIDA

APR 0 6 2013 T. LEMIEUX



COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: ASN Services, Inc. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Bobbi Norwitch Name of Contact Person ASN Services, Inc. Firm/ Company 1622 Newhaven Point Lane Address Royal Palm Beach FL 33411 City/ State and Zip Code bnorwitch@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 371-2039

Area Code & Daytime Telephone Number Bobbi Norwitch Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee **\$35** Filing Fee □\$43.75 Filing Fee & **□**\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| ASN Services, Inc. | |
|--|---|
| (Name o | of Corporation as currently filed with the Florida Dept. of State) |
| P11000004879 | |
| | (Document 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 amendmen |
| A. If amending name, enter the new na | ame of the corporation: |
| N/A | The new |
| name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | ntain the word "corporation," "company," or "incorporated" or the abbreviation nation "Corp," "Inc," or "Co". A professional corporation name must contain the ation," or the abbreviation "P.A." |
| B. Enter new principal office address, (Principal office address MUST BE A S | |
| C. Enter new mailing address, if appl | licable: |
| (Mailing address MAY BE A POST | |
| | |
| | |
| | |
| D. If amending the registered agent ar new registered agent and/or the ne | nd/or registered office address in Florida, enter the name of the |
| | Robbi Norwitch |
| Name of New Registered Agent | 1622 Newhaven Point Lane |
| | (Florida street address) |
| | Royal Palm Beach 33411 |
| New Registered Office Address: | (City) , Florida (Zip Code) |
| | A S |
| | changing Registered Agents |
| New Registered Agent's Signature, if c | changing Registered Agent: |
| I hereby accept the appointment as regis | stered agent I am familiar with and accept the obligations of the position. |
| | |
| | Signature of New Registered ligent 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)

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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.

| Example: X Change | <u>PT</u> | John Doe | |
|----------------------------|----------------|---------------|---------------------------|
| X Remove | V | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | P | Adam Norwitch | 1622 Newhaven Point Lane |
| Add | | | Royal Palm Beach FL 33411 |
| X Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | _ . | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | · | | |
| Add | | | |
| Remove | | | |

| 7. 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/4) N/A | |
|--|---------------|
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | |
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| The date of each amendment(s) adoption:, if other than the date this document was signed. |
|--|
| Effective date if applicable: |
| (no more than 90 days after amendment file date) |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. |
| Adoption of Amendment(s) (CHECK ONE) |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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" (voting group) |
| (voting group) |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. |
| Dated April 1, 2018 Signature |
| (By wdirector, president or other officer – if directors or officers have not been |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| |
| Bobbi Norwitch |
| (Typed or printed name of person signing) |
| President |
| (Title of nerson signing) |