P13000081376

(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer: HICANORO FICA HICH CONCENT THE NEW NAME	103 103 701

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COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: FRACAS ENTERPRISES INC				
DOCUMENT NUMBER: P13000081376				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
ALESSANDED FRACAS Name of Contact Person				
Firm/ Company				
2700 N MIAMI AVE SUITE 504				
Address				
2700 N MIAMI AVE SUITE 504 Address MIAMI FL 33127 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
ALESSAN DRO FRACAS at (786) 238.3160 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 S43.75 Filing Fee Scrifficate of Status Certificate of Status (Additional copy is enclosed) S35 Filing Fee S52.50 Filing Fee S52.50 Filing Fee S6 Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				
Amendment Section Amendment Section Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 26, 2017

ALESSANDRO FRACAS 2700 N. MIAMI AVE STE. 504 MIAMI, FL 33127

SUBJECT: FRACAS ENTERPRISES, INC.

Ref. Number: P13000081376

We have received your document for FRACAS ENTERPRISES, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P17000053293 - TWELVE INC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 217A00021680

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

W	' 1
FRACAS ENTER	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P1300008	31376
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
TWELVE USAI	NC. The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	," "company," or "incorporated" or the abbreviation [o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	SUITE SOY
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MIAMI FL 33127
	SUITE SOU MIAMI E 33127
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent 3035 NE	
New Registered Office Address: MICIM'.	(City) Florida 3313 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	with and accept the obligations of the pastition.
Signature of New Re	egistered Agent, if changing

address of each Office (Attach additional shee Please note the officer: P = President; V = Vic Executive Officer; CF) held. President, Treast Changes should be not a change, Mike Jones Mike Jones, V as Rema	er and/or 1 ets, if neces (director tit ce Presiden O = Chief wer, Direct ted in the fo	Director being added: sary) le by the first letter of the office title: at; T = Treasurer; S = Secretary; D = Director; Financial Officer. If an officer/director holds tor would be PTD. collowing manner. Currently John Doc is listed	officer/director being removed and title, name, and TR= Trustee: C = Chairman or Clerk; CEO = Chief s more than one title, list the first letter of each office l as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	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	$\overline{\vee}$	SARA ZANOBINI	3635 NE p. AVENUE
X Add			APT 1410
Remove			MIAMI FL 33137
2) X Change	P	<u>Alessandro</u>	3635 NE 15 Ave
Add		Fracas	MINM EL 33137
Remove			
3) Change			
Remove			
Kemove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		•	
6) Change			
Add			
Remove			

ach additional sheets, if necessary). (Be specific)	1	
		
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an amendment provides for an exchange, reclassification, or cancellation of issued shares,	1	1
rovisions for implementing the amendment if not contained in the amendment itself:		1
(if not applicable, indicate N/A)	1	1
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 40.20-2011 (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 block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment(
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sha action was not required.	archolder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
Dated 10 /20/2017	
Signature	
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other officers.	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESIDENT (Title of person signing)	
(Title of person signing)	