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DIVISION OF CORPORATIONS

14 JUN 23 AM IO: 58

C. LEWIS

JUL 1 0 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: 4A USA, INC. DOCUMENT NUMBER: _P14000030906 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Candy Brownlow Name of Contact Person John P. Maas Firm/ Company 44 N.E. 16 Street Address Homestead, FL 33030 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 247-7132

Area Code & Daytime Telephone Number Candy Brownlow Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of 4A USA. INC.



14 JUN 23 AM 10: 58

(Name of Corporation as currently filed with the F	lorida Dent. of State)
P1400030906	,
(Document Number of Corporation (if	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
	N/A
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
•	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office addr	
new registered agent and/or the new registered of fice address.	<u>.</u>
Name of New Registered Agent NIA	
<u> </u>	
(Florida stre	eet address)
New Registered Office Address: N/A (City)	, Florida (Zip Code)
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	viin and accept the obligations of the position.
Signature of New Pagistared A	lant 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)

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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D/V/S	Anika T. Nabila	40-69 94 Street, Apt. #3D
Add			Elm Hurst, NY 11373
Remove			
2) Change	D/V/S	Afifa Islam	12364 S.W. 216 Street
Add			Miami, FL 33170
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach addit	ional sheets, if nece	essary). (Be sp	ter change(s) h pecific)			
rticle VI of	the Articles of	Incorporatio	n are hereb	amended to	read: See attach	hed
heet.						
						
						
						
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If an amend	ment provides for	an exchange, r	eclassification.	or cancellation of	issued shares.	
provisions (if not a	for implementing applicable, indicate	the amenament : N/A)	i ii not containe	<u>a in the amename</u>	nt itseii:	
				. <u>.</u> .		
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ARTICLE VI

SUBSCRIBERS

The names and addresses of the subscribers of these Articles of Incorporation and the number of shares they have elected to take are as follows:

SUBSCRIBER	ADDRESS	NUMBER OF <u>SHARES</u>
MOHAMMED AZAD	28 Woodmere Drive Drums, PA 18222	25
SAYEDA AKTHER	28 Woodmere Drive Drums, PA 18222	20
AFIFA ISLAM	12364 S.W. 216 Street Miami, FL 33170	20
JAHANGIR ALAM	40-69 94 Street, Apt. #3G Elm Hurst, NY 11373	35



The date of each amendment(s) adopt	ion:	, if other than the
date this document was signed.	14 JUN 23 AM 10: 58	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes east for the amendment(s) ent for approval.	
	ed by the shareholders through voting groups. The following statement having group entitled to vote separately on the amendment(s):	
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by	1	
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated May 36	, 2014	
Signature	ngic	
selected, by	or, president or other officer - if directors or officers have not been an incorporator - if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)	
Mo	hammed Azad	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	