Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: HISPANUSA INC

Account Number : I20070000099

Phone

: (954)478-2706

Fax Number

: (954)934-0334

**Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ACER ENTERPRISE SVCE CORP

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JUN 1 0 2015

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: ACER EN	NTERPRISE SVCE CORP
P14000056	323
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and i	ce are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
ABED E. RUIZ	
	Name of Contact Person
PRESIDENT	
	Firm/ Company
11484 NW 44TH ST	REET
	Address
CORAL SPRINGS I	FL 33065
	City/ State and Zip Code
E-mail address: For further information concerning this mat	heloridagrown Ogmail.com. (to be used for future annual report notification) ter, please call:
ABED RUIZ	at (772) 361-5392 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	nt made payable to the Florida Department of State:
\$35 Filing Fee	_
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

FILED

Articles of Amendment to Articles of Incorporation

	Articles of Incorporation	ا در الإستانية الله الله الله الله الله الله الله الل
ACA TO TOTAL OF THE TOTAL OF TH	of	TALL ANASSEE PLORIDA
CER ENTERPRISE SVCE CORP		
	f Corporation as currently filed with the	Florid Dept: of State
4000056323		
	(Document Number of Corporation (if	known)
rsuant to the provisions of section 607.1 Articles of Incorporation:	006, Florida Statutes, this Florida Profit C	orporation adopts the following amendmen
If amending name, enter the new na	me of the corporation:	
		The new
me must be distinguishable and cont Torp.," "Inc.," or Co.," or the designa ord "chartered," "professional associat	ain the word "corporation," "company," ation "Corp," "Inc," or "Co". A profess: ion," or the abbreviation "P.A."	or "incorporated" or the abbreviation ional corporation name must contain the
Enter new principal office address, i rincipal office address <u>MUST BE A ST</u>		
1 10		
Enter new mailing address, if applic (Mailing address MAY BE A POST C		
		
If amending the registered agent and new registered agent and/or the new	l/or registered office address in Florida, e registered office address:	enter the name of the
Name of New Registered Agent		
	(Florido street address)	
		Florida
New Registered Office Address:		

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)

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	PT	John Dos	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	ABED RUIZ FIGUEROA	11484 NW 44TH STREET
X Add			CORAL SPRINGS FL 33065
Remove			
2) Change	·		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove		•	
6) Change			
Add			
Remove			

Aπach <i>additio</i> .	r adding additional A nal sheets, if necessary,). (Be specific)			
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fan amandm	ent provides for an ex	change reclassifi	iontion or cancell:	ation of issued abore	.4
provisions fo	r implementing the ar	mendment if not c	ontained in the an	nendment itself:	norg.
(if not ap	plicable, indicate N/A)				
					
···					

06/02/2015	
The date of each amendment(s) adoption:	_, if other than the
06/02/2015	
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 redocument's effective date on the Department of State's records.	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 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	
by	
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.	
06/02/2015 Dated	
Signature Boll/hory	
(By a director, 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)	-
ABED E. RUIZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	