P1400095080

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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MARIA ALEKSE	EVA INC	
DOCUMENT NUMB	ER: P14000095680		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	RABIN GOLD		
		Name of Contact Person	1
		Firm/ Company	
	5316 NEW UTRECHT AVE	NUE	
•	BROOKLYN, NY 11219	Address	
-		City/ State and Zip Cod	<u> </u>
DOG	IMPNITE OT A VEROCI TE	•	
	JMENTS@TAXPROSLTD.	com sed for future annual report	notification)
	E-man address, (w be d.	sed for future annual report	neemeanony
For further information	concerning this matter, pleas	se call:	
RABIN GOLD		at (232-1100
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi: P.O.	ing Address Indment Section Ission of Corporations Issox 6327 Issassee, FL 32314	Ameno Divisio Clifton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301



Articles of Amendment to Articles of Incorporation of

MARIA ALEKSEEVA INC

	tly filed with the Florida Dept. of State)
P14000095680	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: LEXUS CONSULTING USA INC.	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	5764 North Orange Blossom Trail PMB 166
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Orlando, FL 32810
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
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	
5764 North Orange Bloss	som Trail PMB 166
(Florida s	treet address)
New Registered Office Address:	Florida 32810
New Negasierea Spice Maaress.	(City) (Zip Code)
New Registered Office Address: New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	(City) (Zip Code)

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 <math>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	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	MARIA ALEKSEEVA	4901 N 36TH STREET
Add			HOLLYWOOD, FL 33021
X Remove			
2) Change	P	DHARMIN WICKREMERATNE	6153 W OAKEY BLVD # C
X Add			LAS VEGAS, NV 89146
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	******		
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach <i>additional sheets, if necessary).</i>	(Be specific)	
· · · · · · · · · · · · · · · · · · ·		
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and in the amendment itself:	

	SEPTEMBER 7, 2015	if athor than the
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
SI Effective date if applicable:	EPTEMBER 7, 2015	
Energy date in approxime.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
	MBER 7, 2015	
Dated Signature	Sham Wilkementre	
selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	DHALMIN WICKREMERATNE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	