

# Florida Department of State

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN ANA'S SERVICES USA INC

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C. CARROTHERS

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TO: Amendment Section

### COVER LETTER

Division of Corpor	rations			
NAME OF CORPOR	<sub>ATION:</sub> ANA'S SEI	RVICES USA IN	C	
	ER: P1500002931			
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.		
Please return all corresp	ondence concerning this ma	atter to the following:		
_	1A	JA ANDREA MA	ARANHAO	
		Name of Contact Perso		
•	PRESIDENT			
Firm/ Company				
_	4511 NW 6TH AVE			
Address				
_	POMPANO BEACH FL 33064			
		City/ State and Zip Cod	c	
hisp	anusa@hotmail.			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se cali:	,	
ANA A. MARA		at (954	483-5842	
Name 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)	
Mailing Address			Address	
Amendment Section		Amendment Section Division of Corporations		
Division of Corporations P.O. Box 6327		Clifton Building		
Tallah	assec, FL 32314	2661 E	xecutive Center Circle	
		1 8118.08	ssee, FL 32301	

#### Articles of Amendment to Articles of Incorporation of

### ANA'S SERVICES USA INC

/\\\ <i>\</i>	40 0E(() 0E0 0	OK IIIO			
(Name of Corporation as currently	v filed with the Florida De	ot, of State)		33,20	<u>_</u>
	P15000029310				<u> </u>
(Document Number	of Corporation (if known)	<del></del>		10 m	APR .
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Florida Pt</i>	ofit Corporation ado	pts the following	amendme	nī(s) to
A. If amending name, enter the new name of the	corporation:			The Trew	8: 35
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or to	orp," "Inc," or "Co". A p.	oany," or "incorpord rofessional corporati	ited" or the ab on name must c	brevlation ontain the	
B. Enter new principal office address, if applical					
(Principal office address MUST BE A STREET A	DDRESS)				
			<del></del>		
C. Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE)	BOX)				
	<del></del>				
D. If amending the registered agent and/or registered agent and/or the new registered	tered office address in Flored office address:	rida, enter the name	of the		
Name of New Registered Agent					
	(Florida street address)	· · · · · · · · · · · · · · · · · · ·			
New Registered Office Address:		, Florida			
	(City)		(Zip Code)		
New Registered Agent's Signature, if changing R			Saka wasiriaw		
I hereby accept the appointment as registered agent	. 1 am jamiuar with and ac	cept the obligations o	j ine position.		
				•	
Signature of	New Registered Agent, if ch	anging			

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	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Р	ANA A. MEARANHAO	4511 NW 6TH AVE
Add			POMPANO BEACH
Remove			FLORIDA 33064
2) Change	Р	ANA ANDREA MARANHAO	4511 NW 6TH AVE
Add			POMPANO BEACH
Remove			FLORIDA 33064
3) Change			
Add			
Remove			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		·	
6) Change	<del></del>		
Add			
Remove			

amending or adding additional Arti- ttach additional sheets, if necessary).	(Be specific)
	^^^···
· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amen	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
·	

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable: 04/06/2015	
(no more than 90 days after amendment file date)	
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 6, 2015	
Signature  (By a director, president of other officer – if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
ANA ANDRÉA MARANHAO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	