

PLEASE PRINT

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

no sign.

Office Use Only



200277033112

200277033112
09/15/15--01018--010 **35.00

15 OCT -2 PM 3:50
TALLAHASSEE, FLORIDA

Amd

OCT 02 2015

R. WHITE



Balwant Cheema
CPA

Certified Public Accountant

FAX COVER SHEET

**To: Florida Department of State
Rebekah White**

**Tel: 850-245-6050
Fax: 850-245-6897**

RE: P15000057803 AGS United Inc Amendment

Page(s) including cover sheet: 7

Ms. White,

I recently submitted an amendment and mistakenly sent it without the officer's signature. I have now obtained the signature and I'm resubmitting to you via Fax. The check that was sent with the amendment has cleared, #1905 for \$35. I am enclosing a copy of the cleared check so it could be properly applied towards this amendment.

Please let me know should you have any questions.

Thank you,

Brian Del Fierro, EA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2015

BRIAN DE FIERRO
8301 NW 197TH ST
MIAMI, FL 33015

SUBJECT: AGS UNITED INC
Ref. Number: P15000057803

We have received your document for AGS UNITED INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An officer/director must sign authorizing the adoption of amendment.

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.

Rebekah White
Regulatory Specialist II

Letter Number: 215A00019819

Fax (850) 245 6897

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AGS UNITED INC

DOCUMENT NUMBER: P15000057803

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRIAN DEL FIERRO
Name of Contact Person
BALWANT CHEEMA CPA
Firm/ Company
8301 NW 197TH ST
Address
MIAMI, FL 33015
City/ State and Zip Code

BRIAN@BALCPA.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRIAN DEL FIERRO at (305) 764-1073
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:

- \$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
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

15 OCT -2 PM 3: 50

AGS UNITED INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P15000057803

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

**B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)**

2100 PONCE DE LEON BLVD

CORAL GABLES, FL 33134

**C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)**

2100 PONCE DE LEON BLVD

CORAL GABLES, FL 33134

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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.

Example:

Change PT John Doe
 Remove V Mike Jones
 Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> <u>Change</u> <input type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	<u>P</u>	<u>ANDREA CESARINI</u>	<u>2100 PONCE DE LEON BLVD</u> <u>CORAL GABLES, FL 33134</u>
2) <input checked="" type="checkbox"/> <u>Change</u> <input type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	<u>VP</u>	<u>ERICH BATTAGIN</u>	<u>2100 PONCE DE LEON BLVD</u> <u>CORAL GABLES, FL 33134</u>
3) <input type="checkbox"/> <u>Change</u> <input type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	_____	_____	_____
4) <input type="checkbox"/> <u>Change</u> <input type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	_____	_____	_____
5) <input type="checkbox"/> <u>Change</u> <input type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	_____	_____	_____
6) <input type="checkbox"/> <u>Change</u> <input type="checkbox"/> <u>Add</u> <input type="checkbox"/> <u>Remove</u>	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

Lined area for providing details for section E.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

Lined area for providing details for section F.

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 not be listed as the document's effective date on the Department of State's records.

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):

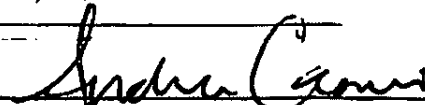
"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

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.

September 7th, 2015
Dated _____

Signature  _____

(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)

ANDREA CESARINI

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)