P16000034552

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MAY - 3 2016 C LEWIS

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	PRATION: ASL USA CORP	<u></u>		
DOCUMENT NUM	P16000034552			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	SONA ROSS			
		Name of Contact Person	1	
	***************************************	Firm/ Company	· · · · · · · · · · · · · · · · · · ·	
	1602 ALTON ROAD 384			
		Address		
	MIAMI BEACH, FL 33139			
		City/ State and Zip Cod	e	
LLE	EPIANE@GMAIL.COM			
- 	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
SONA ROSS		at (744-1964	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check t	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)	
	ailing Address		Address	
	nendment Section	Amendment Section		
וט	vision of Corporations	Division of Corporations		

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to



Articles of incorporation	
ASI $11 < A$ of 1	16 MAY -2 PM 2: 47
TIE USA CORP	
(Name of Corporation as currently filed with the F	lorida Dept. of State)
P160000	034552
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Contest</i> Articles of Incorporation:	rporation adopts the following amendment
. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A profession or the abbreviation "P.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)	
). If amending the registered agent and/or registered office address in Florida, er	iter 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:(City)	, Florida
(Cuy)	(Zip Coue)
Jun During A and A control of the state of t	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the	e obligations of the position.
22) accept the appendiction as registered agents I am juminal min and decept the	garrens of the position
Signature of New Registered Agent, i	f 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>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	S	_ _	SONA ROSS	1602 ALTON RD 384
X Add				MIAMI, FL 33139
Remove				
2) Change				
Add				
Remove				-
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	_			
Add				
Remove				

	(Be specific)
<u> </u>	

f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) add	ption:		, if other than the
date this document was signed.		SECRETAR	TED Y STATE 101208ATION:
Effective date if applicable:			
	(no more than 90 days after amendmen	nt file date) 114 -2	PM 2: 48
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing reartment of State's records.	equirements, this dat	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast icient for approval.	for the amendment(s)
	oved by the shareholders through voting groups. To ach voting group entitled to vote separately on the		nt
"The number of votes cast f	or the amendment(s) was/were sufficient for approv	al	
by		**	
. ,	(voting group)	_ ·	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder as	ction and shareholde	r
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action	and shareholder	
04/26/2016 Dated	tma PROSS		
selected	ector, president or other officer — if directors or off by an incorporator — if in the hands of a receiver, t d fiduciary by that fiduciary)		:
;	SONA ROSS		
-	(Typed or printed name of person signing	g)	
	/P		
-	(Title of person signing)		