## P17000038427

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SECRETARY OF STATE NE

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION

NAME OF CORPORATION: Premfil	+ USA Corp.			
DOCUMENT NUMBER: P170C	00038427			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
Cataling Leibowitz  Name of Contact Person  Premitt USA Corp  Firm/Company  12550 Biscoyne Bhyd 5.800 PMB 402  Address  Migmi, FL 33181  City/State and Zip Code  Cleibowitz & Prencitt. Com  E-mail address: (to be used for future annual report notification)				
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:				
Cataling Leibowitz	at (786) 479 - 9305 Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:  \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
Certificate of Status	Certified Copy (Additional copy is enclosed)  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			

SECRETARY OF STATE OIVISION OF CERPORATION

## Articles of Amendment to Articles of Incorporation

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Premailt	USA CORP.
(Name of Corporation	n as currently filed with the Florida Dept. of State)
P17000	038427
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the con	<u>poration:</u>
	The new
	" "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADD</u>	RESS)
	<b>1</b> 566
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BO)</u>	Japan Signatura
	<u> </u>
D. If amending the registered agent and/or registere	ed office address in Florida, enter the name of the
new registered agent and/or the new registered of	
Name of New Registered Agent	•
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	stered Agent:  am familiar with and accept the obligations of the position.
2.10. 20, decept the appendment de regimerou agent. I	and an accept the congainers of the position.
Signa	ture 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: X Change	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	V Leibowitz Leibowitz	
Add		
Remove		
2) Change	V Catalina Leibouitz	9180 W. Bay Harber Dr. PHC Bay Harbor Islands
Remove		FL. 33154
3) Change		<u> </u>
Add		<del></del>
Remove		
4) Change		·
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)		
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F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
N/A		

The date of each amendment(s) adoption date this document was signed.	otion:	, if other than th
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date retreet of State's records.	will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement sch 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 adopte action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated 11ag	1- 2017	
Signature		
selected, b	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
	Cataling Leibowitz (Typed or printed name of person signing)	
	Vice - President (Title of person signing)	
	( i tue oi person signing)	