

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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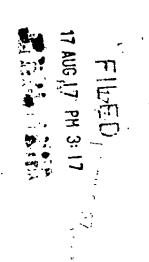
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07/21/17--01010--014 **35.00





COVER LETTER

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TO: Amendment Section Division of Corporations

SUBJECT: Shuttles USA Services, Inc

Name of Corporation
P17000060198

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yohani Gonzalez De Lazaro

Name of Contact Person

Shuttles USA Services, Inc.

Firm/Company

1129 Sophie blvd

Address

Orlando, FL 32828

City/State and Zip Code

yohani@shuttlesusa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yohani Gonzalez De Lazaro at 321____209-5429

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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



July 24, 2017

YOHANI GONZALEZ DE LAZARO 1129 SOPHIE BLVD ORLANDO, FL 32828

SUBJECT: SHUTTLES USA SERVICES, INC.

Ref. Number: P17000060198

We have received your document for SHUTTLES USA SERVICES, 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):

The change of registered agent form cannot be used to amend the officer/director detail. Please see the enclosed information.

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.

Letter Number: 817A00014910

Rebekah White Regulatory Specialist II



Articles of Amendment Articles of Incorporation

FILED 17 AUG 17 PH 3: 1737

Shutfles USA, inc.

(Name of Corporation as currently filed with the Florida Dept. of State # 28;

(Document Number of Corporation (if known)

dment(s) to

. If amending name, enter the new name of the	he corporation:	II
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "C ord "chartered," "professional association," or	Corp." "Inc." of	tion," "company," or "incorporated" or the abbr r "Co". A professional corporation name must con m "P.A."
. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>	eable: ADDRESS)	Ollando, A 32828
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>E BON</u>)	Pobox 781147 ONLAND, FL 32878
		Ollando, Ft 32878
. If amending the registered agent and/or reg new registered agent and/or the new register		ddress in Florida, enter the name of the
		ddress in Florida, enter the name of the
new registered agent and/or the new registe	ered office addr	ddress in Florida, enter the name of the
	ered office addr	ddress in Florida, enter the name of the ess:

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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Safly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u> <u>Addres</u> s	
1) Change	PT	Yohani Gouzalez de Lazaro 1129 Sophiz blyd	
∠ Add	-	Yohani Gouzalez de Lazaro 1129 sophiz 6/1/2 Oalando, FC 3282	8
Remove			
2) Change	Pt	Kznny Rodniguez Garcia 850 NZ 209 ter 203-35	
Add			22.2
Remove		North Miahu Beach FC	3312
3) Change	**		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)
	
	
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If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	-
	<u> </u>

The date of each amendment(s) a	doption: 811417	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirements, this despartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes east for the amendment(ifficient for approval.	s)
	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and sharehold	er
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	12/17	
(By a c	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other couted fiduciary by that fiduciary)	ri
	Yohani Gronzalaz de AZANO	
	(Typed or printed name of person signing) Prasl taut O+	
	(Title of person signing)	<u>.</u>