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18 APR 24 PH 4: 13

APR 2 5 2010 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	NOVA GENERAL	L SERVICES, CORP			
DOCUMENT NUME	BER: P18000026776				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	NOYA, VIVIANE				
•	Name of Contact Person				
		Firm/ Company			
	1340 NW 48 PL				
	Address POMPANO BEACH. FL 33064				
		City/ State and Zip Cod	e		
VIVI	ANENOYA@HOTMAIL.CC)M			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
NOYA, VIVIANE		at (de & Daytime Telephone Number		
Name of Contact Person Area Code & Daytime Telephor		de & Daytime Telephone Number			
Enclosed is a check fo	r 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Nova General Servi	ices. Ce	orp.			
(Name of Corporation as	currently fi	led with the Floric	la Dept. of State)		
P18000026776	5				
(Document N	Number of Co	orporation (if know	1)		
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this <i>Fla</i>	orida Profit Corport	ution adopts the fo	ollowing amendin	ent(s) to
A. If amending name, enter the new name of the corpora	ration:			The nev	
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	'nc," or "Co	". A professional	incorporated" or corporation name	the abbreviation	n
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.	<u>SS</u>)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				8 APR 24 PH 4: 1	FILED
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		s in Florida, enter	the name of the	 	
Name of New Registered Agent					
	Florida street	address)			
New Registered Office Address:			, Florida		
	(C	ityı		(Zip Code)	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	r <u>ed Agent:</u> I familiar wit	h and accept the ob	ligations of the po	sition.	
Signature	e of New Reg	istered Agent, if cho	unging		

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 = ChiefExecutive 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	þ	NOYA, VIVIANE	1340 NW 48 PL
X Add			POMPANO BEACH, FL 33064
Remove			
2) Change	VP	NOYA, PAULO ROBERTO A, JR	1340 NW 48 PL
X Add			POMPANO BEACH, FL 33064
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attac	h additional sheets, if necessary). (Be specific)
_	
far	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
	(y ma upplication, marcine 1977)

The date of each amendmen date this document was signed	· · · · · · · · · · · · · · · · · · ·	, if other than the
	03/19/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	ere adopted by the shareholders. The number of votes cast for the amendmenter sufficient for approval.	ent(s)
	ere approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	lement
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareh	older
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholde	r
Dated		
Signature _		
5	By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
	NOYA, VIVIANE	
	(Typed or printed name of person signing)	
	presint	

(Title of person signing)