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JUL 20 2018 S. YOUNG 18 JUL 18 AH 8: 53 SECRETARY OF STATE JALLAHASSEE, FLORDA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Servicios Aba, In	ic.	
DOCUMENT NUM	BER: P18000057846		
	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Saily Santana		
		Name of Contact Person	0
	Servicios Aba, Inc.		
		Firm/ Company	
	13925 SW 161 Terrace		
		Address	
	Miami, FL 33177		
		City/ State and Zip Cod	e
saily	_santana@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Saily Santana		786 at (de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□S43.75 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)
Am Div P.C	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Companyion as aureantly		
i Corporation as currenti <u>s</u>	filed with the Florida Dept. of State)	
(Document Number of	Corporation (if known)	
1006, Florida Statutes, this F	Clorida Profit Corporation adopts the fo	ollowing amendment(s) to
me of the corporation:		
		The new
ation "Corp," "Inc," or "C	lo". A professional corporation name	the abbreviation
OFFICE BOX) d/or registered office addre		FILED 18 JUL 18 M 8: 53 SECRETASSEE, FLORDA
	,	A . ~~
	, Florida_	3177 (Lip Code)
ered agent. I am familiar w		sition.
	me of the corporation: ain the word "corporation ation "Corp." "Inc." or "Corporation "For applicable: [REET ADDRESS] Cable: OFFICE BOX Cable: OFFIC	ain the word "corporation." "company," or "incorporated" or ation "Corp." "Inc," or "Co". A professional corporation name ion," or the abbreviation "P.A." f applicable: [FREET ADDRESS] Cable: DFFICE BOX) d/or registered office address in Florida, enter the name of the registered office address: Saily Santana 13925 SW 161 Terrace (Florida street address) Miami (City) (City)

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 De	<u>oe</u>			
X Remove	<u>V</u>	Mike Jo	<u>nes</u>			
_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	Р		Adalberto Martin		13925 SW 161 Terr	
Add					Miami, FL 33177	
x Remove						
2) Change	P	_	Saily Santana		13925 SW 161 Terrace	
x Add					Miami, FL 33177	
Remove						_
3) Change		_				
Add						
Remove						_
4) Change						_
Add						
Remove						
5) Change				<u>.</u>		
Add						
Remove						
6) Change						
Add						_
Remove						_
ICCIIIOTC						

Attach <i>additio</i>	onal sheets, if necessar	Articles, enter cha v). (Be specific)				
<u>-</u>				,		
· <u> </u>						
					<u> </u>	
						_
						
f an amendn	nent provides for an e	xchange, reclassi	fication, or cance	llation of issued :	shares,	
provisions fo	or implementing the a opticable, indicate N/A	mendment if not	contained in the	amendment itself	<u>:</u>	
(1) 1101 14	pricante, mateure inii	,				
	·					

. . . .

The date of each amendment(s) adoption:, if other than
date this document was signed. 07/16/2018
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 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
by
☐ 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.
07/16/2018 Dated
Signature & Aboll & Mite
(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)
Adalberto Martin
(Typed or printed name of person signing)
President
(Title of person signing)