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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CONTADORUSA INC. Account Number : I20200000118 Phone : (305)260-6968 Fax Number : (786)513-7810

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October 30, 2024

FLORIDA DEPARTMENT OF STATE Division of Corporations

A10 USA, CORP 648 W. HALLANDALE BEACH BLVD HALLANDALE BEACH, FL 33009US

SUBJECT: A10 USA, CORP

REF: P18000093258

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The form you submitted is for a LLC, but your entity is a CORPORATION. Please complete and return the enclosed blank form(s).

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.

Tammi Cline FAX Aud. #: H24000361498

Regulatory Specialist II Supervisor Letter Number: 624A00023969

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## Articles of Amendment to Articles of Incorporation of

A10 USA CORP		
(Name of Corporation as currently filed with the P18000093258	Florida Dept. of State)	
(Document Number of Corporation (	(if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following a	mendment(s) to
A. If amending name, enter the new name of the corporation:		
		he new
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must con-	reviation nain the
B. Enter new principal office address, if applicable:	14040 BISCAYNE BLVD APT 408	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	NORTH MIAMI BEACH, FL 33181	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14040 BISCAYNE BLVD APT 408	
	NORTH MIAMI BEACH, FL 33181	
	(C	2
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address.  Name of New Registered Agent	ress in Florida, enter the name of the	F 1 - 70W +20
учите от ком кедікістей ддет	SON	•
(Florida str	rect address)	
New Revistered Office Address: (Civ.	, l forida	<u>5</u>
10 iĝo	7 (21) ( ode)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		
Signature of New Registered	Agent, if changing	

To:

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I) Change	P	GENTIL NUNES, AMAURY	14040 BISCAYNE BLVD APT 408
Add			NORTH MIAMI BEACH, FL 33181
Remove			
2) Change			
Add			
Remove			
3) Change			2024 NOV
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Remove			-7
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5) Change			
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Remove			
6) Change			
Add			
Remove			

PANOY - 7 AN 10: 51  PANOY - 1	Attach <i>additional sl</i>	ling additional Ar lects. if necessary).	(Be specific,	ange(s) nere:				
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate NA)		<del></del>	<del></del>	····				
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The date of each amendment(s) adoption:	_, if other than th
Effective date if applicable:	
(no more than 90 days after amendment file date)	_
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 unendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	202
(voting group)	₹ ~m
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	7   7   1   1   1   1   1   1   1   1
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.	를 <b>Ö</b>
Dnted AUGUST 20, 2024	<u>5</u>
Signature	_
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hunds of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
AMAURY GENTIL NUNES	
(Typed or printed name of person signing)	-
PRESIDENT	
(Title of person signing)	-