P1900000 1992

(Re	equestor's Name)				
(Ac	ldress)				
(Ac	ldress)				
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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SUPLIVEN USA.	INC	
DOCUMENT NUMB	P19000001992		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
	FRANCY RODRIGUE	Z	
-	-	Name of Contact Person	1
	ATC PROFESSIONAL	SERVICES, INC	
-		Firm/ Company	
	3645 WEST 16TH AVE	YUE	
-		Address	
	HIALEAH, FL 33012		
		City/ State and Zip Code	С
	f.rodriguez.atc@hotmail.	com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
FRANCY RODRIGUEZ		786 at (4401932
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
	ing Address		Address
	ndment Section sion of Corporations		Iment Section on of Corporations
	Box 6327		Building
	hassee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SUPLIVEN USA, INC

301 EIVEN 03A, IIIC						
(Name of Corporation	on as currently	filed with the Fl	lorida Dept. of Sta	<u>te</u>)		
P19000001992						
(Docum	ent Number of (Corporation (if kr	nown)			
rrsuant to the provisions of section 607.1006, Florida Articles of Incorporation:	Statutes, this F.	lorida Profit Cor	poration adopts the	ofollowing	amendme	ent(s
If amending name, enter the new name of the co	rporation:					
					The new	
me must be distinguishable and contain the word Corp.," "Inc.," or Co.," or the designation "Corp, ord "chartered," "professional association," or the	" "Inc," or "C	o". A professio		or the ab	breviation	1
Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD						
					19	
		 		- 		
Enter new mailing address, if applicable:				55	CT T	Ï
(Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)				-5-	- -
				• - •	<u> </u>	5
					 5	
			•			
If amending the registered agent and/or register new registered agent and/or the new registered		ss in Florida, en	ter the name of th	<u>e</u> .,		
Name of New Registered Agent						
	(Florida stree	et address)				
Name Productional Office Addresses			Florid			
New Registered Office Address:	((City)	, Florida	a(Zip Ci	ode)	
ew Registered Agent's Signature, if changing Reg	istered Agent:					
hereby accept the appointment as registered agent.	I am familiar wi	ith and accept the	e obligations of the	position.		
Sign	ature of New Re	gistered Agent, it	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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	ANDREA C. GONZALEZ Q.	145 SW 13TH ST. APT 254
Add			MIAMI, FL 33130
X Remove			
2) Change	VP	KRISTHONFER A. BARRIOS V.	145 SW 13TH ST. APT 254
Add			MIAMI, FL 33130
X Remove			
3) Change	Р	KRISTHONFER A, BARRIOS V.	145 SW 13TH ST. APT 254
X Add			MIAMI, FL 33130
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			_ -

Attach additiona	adding additional Articles I sheets, if necessary). (I	Be specific)	-		
· •	· ·		,		
	 				
					- · · · ·
				· :	
					<u>-</u>
					
f an amandma	nt provides for an exchang	ua maalaasifiaation	ar agraduation of i	seved shares	
provisions for	implementing the amendr	nent if not containe	ed in the amendmer	it itself:	
(if not appi	icable, indicate N/A)				
					
			<u> </u>		
				_	
 -					

	OCTOBER 16, 201	9	
The date of each amendment(s) add date this document was signed.			, if other than th
OCT	OBER 16, 2019		
Effective date <u>if applicable</u> :	(no more than 90	days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep		able statutory filing requirements, this of	date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adop by the shareholders was/were suff		number of votes east for the amendmen	u(s)
		ugh voting groups. The following stater ote separately on the amendment(s):	nent
"The number of votes cast for	or the amendment(s) was/were	sufficient for approval	
by	(voting group)	13	
	(voting group)		
☐ The amendment(s) was/were adoptaction was not required.	ted by the board of directors v	without shareholder action and sharehol	der
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators withc	out shareholder action and shareholder	
Dated . 10	-18-2019.		
Signature An	-18-2019. dre. Gowzelez_		
(By a dir selected,	ector, president or other office	er – if directors or officers have not been hands of a receiver, trustee, or other co	
	ANDREA C. GONZALEZ	CQ.	
_	(Typed or printed n	ame of person signing)	
	PRESIDENT		
-	(Title o	f person signing)	