P190000 51879

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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A. C. MARAI O LODE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N:	RTION USA INVESTMEN	T CORP.		
DOCUMENT NUMBER: _	P19000051879				
The enclosed Articles of Ame	endment and fee are su	ibmitted for filing.			
Please return all corresponder	nce concerning this ma	tter to the following:			
	E/	/ELYN R GONZALEZ EA	MBA		
		Name of Contact Person	n		
	ACCOUNTING CENTER FOR SMALL BUSINESS LLC				
	Firm/ Company				
5701 DOGWOOD DR					
Address					
ORLANDO FL 32807					
City/ State and Zip Code					
	,	ACCORL.EVELYN@GMA	AIL.COM		
E	-mail address: (to be u	sed for future annual report	notification)		
For further information conce	_ ,)		
Name of Cont	act Person	Area Co) de & Daytime Telephone Number		
Enclosed is a check for the fo	llowing amount made	payable to the Florida Depa	artment of State:		
Ç	\$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		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

of

CERTION USA INVESTMENT CORP.

FILED

	P19000051879	2019 JUL 10 P & 21	
(D	ocument Number of Corporation (if known)	SECRETARY OF STAIL TALLAHASSEE, FLORIDA	
Pursuant to the provisions of section 607.1006, Fl ts Articles of Incorporation:	forida Statutes, this <i>Florida Profit Corporati</i>	ion adopts the following amendment(s)	
A. If amending name, enter the new name of the	he corporation:		
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	Corp," "Inc," or "Co". A professional co		
3. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>			
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>	E BOX)		
If amending the registered agent and/or registered agent and/or the new registered.		e name of the	
Name of New Registered Agent	JANETH LLANOS		
	5120 CURRY FORD ROAD	-	
New Registered Office Address:	(Florida street address) ORLANDO	Florida 32812	
New Negisterea Office Mauress.	(City)	(Zip Code)	
New Registered Agent's Signature, if changing hereby accept the appointment as registered age		• ,	

Signature of New Registered Agent, if 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 Doc			
X Remove	\underline{V}	Mike Jones			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) X Change	P	JUAN F BETANCUR FRANCO	5120 CURRY FORD ROAD		
Add			ORLANDO FL 32812		
Remove					
2) X Change	<u>s</u>	MARIA C ESCOBAR	5120 CURRY FORD ROAD		
Add					
Remove					
3) Change					
Add					
Remove					
4) Change			· · · · · · · · · · · · · · · · · · ·		
Add			<u> </u>		
Remove					
5) Change					
Add					
Remove			-		
6) Change					
Add					
Remove					

Attach <i>addi</i>	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
-	·					<u> </u>
	·					
						<u>-</u>
_	,					
			•			
f an amen	dment provides for a	n exchange, reclas	sification, or canc	ellation of issued	shares.	
provisions	for implementing the applicable, indicate N	e amendment if no	t contained in the	amendment itsel	<u>f:</u>	
(ij noi	аррисате, такале к	774 }				
		_				
						

The date of each amendment(s) and date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	1 not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement 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	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
JULY 2, 20	019	
Signature		
selecte	lirector, president or other of seer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	JUAN F BETANCUR FRANCO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	