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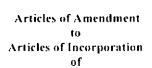
1.116 . 2011

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: HASHTING USA.	. INC	
DOCUMENT NUM			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	JAIR BARRIOS		
	_	Name of Contact Persor	1
	BARRIOS ACCOUNTING	& IMMIGRATION, INC	
		Firm/ Company	
	11386 67TH PL N		
		Address	
	WEST PALM BEACH, FL 3	33412	
		City/ State and Zip Code	2
	jbarrios@accountingimmigra	ition.com	
	E-mail address: (to be us	sed for future annual report	notification)
	n concerning this matter, plea		
JAIR BARRIOS		at (821-7878 ext 102 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r 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)	U\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Div P.O	endment Section ision of Corporations Box 6327 ahassee, F1, 32314	Amend Divisio The Co	Address ment Section on of Corporations entre of Tallahassee S. Monroe Street, Suite 810

Tallahassee, FL 32303



	~ ~			
11.5	SHI	INC	I IS A	INC

(Name (of Corporation as currently	filed with the Florida Der	ot. of State)		
P20000011322					
"	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>F</i>	lorida Profit Corporation a	dopts the followin	g amend	ment(s) to
A. If amending name, enter the new na	ame of the corporation:				
N/A				The n	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	Corp." "Inc." or "Co". A	ompany," or "incorporated" professional corporation i	or the abbreviationame must contai	n "Corp) ''
B. Enter new principal office address,	if annlicable:	N/A			
(Principal office address MUST BE A S					_
					_
					-
C. Enter new mailing address, if appli	icable:	N/A			
(Mailing address <u>MAY BE A POST</u>)	<u>OFFICE BOX</u>)				_
					_
5.4 6			6.1	-0	-
D. If amending the registered agent an new registered agent and/or the new		ess in Florida, enter the na	me of the	75	معرد ٠
Name of New Registered Agent	CHRISTIAN M. VICTOR	BIELEN	•	PR.12: 116	
Name of New Registered Agent	11386 67TH PL N		, , , , ,	_ 0'	
	(Florida stre	et address)	-	-	
	WEST PALM BEACH		m 33412		
New Registered Office Address:		City)	_, Florida <u> </u>	Code	-
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligation	ns of the position.		
_Chris	itian M. Victor			_	
	Signature of New Re	gistered Agent, if changing			
Charles and a second					

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	PT	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	\underline{sv}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	CHRISTIAN M. VICTOR BIELEN	11386 67TH PL N
Add			WEST PALM BEACH, FL 33412
Remove 2) X Change	VP	KARL DE BEUL	11386 67TH PL N
Add			WEST PALM BEACH, FL 33412
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

A	ets, if necessary). (Be specific)	
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	ovides for an exchange, reclassification, or cancellation of issued shares,	
f an amendment pro		
provisions for imple	ementing the amendment if not contained in the amendment itself:	
provisions for imple (if not applicable	ementing the amendment if not contained in the amendment itself:	
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The date of each amendm e n	at(s) adoption:
date this document was signed	d. - 07/21/2021
Effective date <u>if applicable</u> :	(no more than 90) days after amendment file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted in locument's effective date on	this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/we action was not required.	ere adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/we by the shareholders was/v	ere adopted by the shareholders. The number of votes east for the amendment(s) were sufficient for approval.
☐ The amendment(s) was/wa must be separately provide	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of voto	es cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
	1/2021
Dated	
Signature	Christian M. Victor
_ (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 tiduciary)
	CHRISTIAN M. VICTOR BIELEN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)