P20000014188

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COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPO	ORATION: Amusement Ride S	uppliers, Inc	
DOCUMENT NUM	IBER: P20000014188		
	s of Amendment and fee are sub	omitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
	Cyril Nicola		
		Name of Contact Persor	1
	Amusement Ride Suppliers, I	nc	
		Firm/ Company	
	PO BOX 1266		
		Address	-
	Glendora, CA 91740		
		City/ State and Zip Code	<u> </u>
		•	
	bashir@usataxaccounting.con		
	E-mail address: (to be us	ed for future annual report	notification)
	t attendance to	11.	
For further informati	on concerning this matter, pleas	е сан:	
Cyil Nicola		at (<u>310</u>	755-9904
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made p	payable to the Florida Depa	artment of State:
S35 Filing Fee	! §\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Amusement Ride Suppliers, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P20000014188 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Florida street address)

(City)

Check if applicable

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

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(Zip Code)

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> <u>Joh</u>	en Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	CFO/D	Joanna N Padilla Vasques	6550 Main St #141
Add			New Port Richey, FL 34653, US
X Remove 2) Change	CFO	Cyril Nicola	6550 Main St \$141
X Add			New Port Richey, FL 34653, US
Remove 3) Change			
Add			
Remove 4) Change			
Add			
Remove 5) Change			
Add			
Remove 6) Change			
Add			
Remove			

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 N/A)	ittach <i>additiona</i>	adding additional Arti ul sheets, if necessary).	(Be specific)			
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· ·	March 8th 2020	
The date of each amendmendate this document was signed		, if other than the
	March 1st 2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more man 90 days after amenament fire date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, he Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sharehol	der action and shareholder
	re adopted by the shareholders. The number of votes cast for the amerere sufficient for approval.	ndment(s)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following ed for each voting group entitled to vote separately on the amendment	statement (s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
bv	;;	
	(voting group)	
Marc	n 9th 2020	
Dated		
Signature	alla M	
(F	by a director, president or other officer – if directors or officers have ne elected, by an incorporator – if in the hands of a receiver, trustee, or ot ppointed fiduciary by that fiduciary)	
	Ramy Morgan	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	