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(((H20000090950 3)))



H200000909503ABCZ

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN UGEARS USA, CORP.

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MAR 2 4 2020 Help

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TO: Amendment Section

## **COVER LETTER**

Division of Corp	orations				
NAME OF CORPO	RATION: UGEARS USA, C	CORP.			
DOCUMENT NUMI	P20000020321				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Picase return all corre-	spondence concerning this ma	atter to the following:			
	HENNADII SHESTAK				
		Name of Contact Perso	n		
	UGEARS USA, CORP.				
	Firm/ Company				
	2840 STIRLING RD, SUITE J				
	Address				
	HOLLYWOOD, FL 33020				
		City/ State and Zip Cod	e		
	usa7ua@gmail.com				
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	n concerning this matter, plea	se call:			
HENNADII SHESTAK		at ( <sup>305</sup>	9300176 de & Daytime Telephone Number		
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:		
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐\$43,75 Fiting Fce & 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		Street Address  Amendment Section  Division of Corporations  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810  Tullahassee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

UGEARS USA, CORP.						
(Name o	Corporation as curren	tly filed with the Florida De	pt. of State)			
P20000020321						
	(Document Number	of Corporation (if known)			<del>-</del>	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Flurida Profit Corporation	adopts the fo	lowing amer	ndment(s)	) to
A. If amending pame, enter the new na	me of the corporation:					
				The	new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	arp," "Inc," or "Co".	A professional corporation	i" or the abbi name must	reviation "Co	rp.,"	
B. Enter new principal office address,	f applicable:					
(Principal office address MUST BE A ST	TREET ADDRESS)					
			· · · · · · · · · · · · · · · · · · ·	<u>-</u>		
C. Enter new mailing address, if appli	cable:			TA!	26	
(Mailing address MAY BE A POST C	OFFICE BOX)			12 - 13 - 13 - 13 - 13 - 13 - 13 - 13 -	10/1	
				<u>====</u>	-\$5 	
					1/2	
					~~·	
D. If amending the registered agent an new registered agent and/or the new	<u>d/or registered office addres</u> registered office addres	dress in Florida, enter the n is:	ame of the	7,	io Ki	; I
	SHESTAK, HENNADII				<b>©</b>	•
Name of New Registered Agent					~	
	/Fladda	treet address)		<del></del>		
	(F10F1da 3	iree: daaress)				
New Registered Office Address:		(Cip)	, Florida	(Zip Code)		
		(0.1)/		1		
New Registered Agent's Signature, if ch	anging Registered Agen	<u>t:</u>				
I hereby accept the appointment as registe	red agent. I am familiar	with and accept the obligation	ons of the pos	sition.		
	Hennadii .	Shestak				
	Signature of New	Registered Agent, if changing		<del>_</del>		
Ch. 1.12						
Check if applicable  The amendment(s) is/are being filed put	rsuant 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:

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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	P _	KHACHERASHVILI, RUSLAN	2840 STIRLING RD, SUITE J
Add		<del>-</del>	HOLLYWOOD, FL 33020
X Remove			
2) Change	P	SHESTAK, HENNADII	2840 STIRLING RD, SUITE J
X Add			HOLLYWOOD, FL 33020
Remove 3) Change	۷ľ٬	KRAVCHUK, OLGA	2840 STIRLING RD, SUITE J
X Add			HOLLYWOOD, FL 33020
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

		doption:	if other than th
date this docume	mi was signeu.		
Effective date if	applicable:		<del></del>
		(no more than 90 days after amendment file date)	
		lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Am	rendment(s)	(CHECK ONE)	
The amendment action was no		opted by the incorporators, or board of directors without shareholder a	ction and sharcholder
		opted by the shareholders. The number of votes east for the amendme fficient for approval.	nt(s)
☐ The amendme must be separ	ent(s) was/were app rately provided for	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	rment .
"The nu	imber of votes cast	for the amendment(s) was/were sufficient for approval	
by		n	
17		(voling group)	
	03/23/2020		
	Dated		
	Signature	Hennadii Shestak	
	selected	rector, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other could fiduciary by that fiduciary)	
		HENNADII SHESTAK	
		(Typed or printed name of person signing)	
		P	
	,	(Title of person signing)	