P2000008564

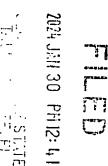
(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	A Squared Unlir	mited Inc		
DOCUMENT NUMBER:	P20000081564			
The enclosed Articles of Amenda	ment and fee are su	bmitted for filing.		
Please return all correspondence	concerning this ma	atter to the following:		
		Ana Amoroso		
.		Name of Contact Person	1	
		A Squared Unlimited Inc		
		Firm/ Company		
		13611 S Dixie Hwy		
		Address		
		Miami, Florida 33176		
		City/ State and Zip Code	2	
		asquared@myyahoo.co	m	
E-ma	il address: (to be u	sed for future annual report	notification)	
For further information concerni	ng this matter, pleas	se call:		
Ana Amoroso		at (338-4148	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the follow	wing amount made	payable to the Florida Depa	artment of State:	
-	3.75 Filing Fee & rtificate 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 Addr			Address	
Amendment Se		Amendment Section		
Division of Co	-		on of Corporations entre of Tallahassee	
P.O. Box 6327		The Centre of Tallahassee		

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation of

Ell Pa

	A Squared Unlin	nited Inc		<u> </u>
(Name of Corpo	ration as currently	filed with the Flori	da Dept. of Sta	ite)
	A Squared Unlin pration as currently (P20000081	564	2024 JAN 30	Při 12: 41
(Do	ocument Number of C	Corporation (if know	vn)	 STATE
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this FI	orida Profit Corpo	ration adopts th	
A. If amending name, enter the new name of th	he corporation:			
				The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," ". "chartered," "professional association," or the a	Inc," or "Co". A p			
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET).				
				
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)			
manng and man	, <u> </u>		****	
			-	
 If amending the registered agent and/or reg new registered agent and/or the new registe 		ss in Florida, enter	the name of th	<u>1e</u>
Name of New Registered Agent				
Hume of New Registered Agent				
	(Florida street	t address)		
New Registered Office Address:			Florid	
	(C	ity)		(Zip Code)
New Registered Agent's Signature, if changing	Registered Agent:			
l hereby accept the appointment as registered age		h and accept the of	ligations of the	position.
	Signature of New Reg	istered Agent, if chi	anging	
	G 977 Mg	3 ,	0 0	

Check if applicable

[☐] 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)

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 Do	<u>nc</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change				
Add	 : - · · · ·			
Remove				

Ownership distribi	ution is as follows: Anthony Amoroso 50% and Carol Amoroso 50%	

F. If an amendme	ent provides for an exchange, reclassification, or cancellation of issued sh	ares,
provisions for	implementing the amendment if not contained in the amendment itself:	
· · · · · · · · · · · · · · · · · · ·	olicable, indicate N/A)	
Total of 100 share	es are divided as follows: Anthony Amoroso 50 and Carol Amoroso 50	
		-
		

The date of each amendment(s) addate this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requir partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without s	hareholder action and shareholder
■ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the flicient for approval.	he amendment(s)
	roved by the shareholders through voting groups. The foe each voting group entitled to vote separately on the amen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
selected	rector, president or other officer – if directors or officers I, by an incorporator – if in the hands of a receiver, truste ed fiduciary by that fiduciary) Anthony Amoroso (Typed or printed name of person signing) President	
	(Title of person signing)	