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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	CUTS USA, COR	P.				
DOCUMENT NUME	P07000074016			-		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
		KEVIN BALBOA				
		Name of Contact Perso	n			
-		Firm/ Company				
	1666 KENNEDY CAUSEWAY #100					
•		Address				
	N. BAY VILLAGE, FL. 33141					
•		City/ State and Zip Cod	e			
	RESCU	JETHEYOUTHRTY@YA	ноо.сом	FALL	5	
	E-mail address: (to be us	sed for future annual report	notification)			****
	n concerning this matter, pleas	se call:		TARY OF ASSEE, I	6 JUN - 1 PH 4: 1	
KEV	VIN BALBOA	786 at (587-9951	30	Æ	
Name o	of Contact Person	Area Co	de & Daytime Telephone Nu	mber 3	$\overline{\sim}$	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:	***************************************		
\$35 Filing Fee	☐\$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)	·		
	ling Address ndment Section		Address Iment Section			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CUTS USA, CORP.

	66.15.65.1,	old .		
(Name of Cor	ooration as currently fi	led with the Florida De	pt. of State)	
	P970000749	16		
(1	Document Number of Co	orporation (if known)		
Pursuant to the provisions of section 607.1006, Its Articles of Incorporation:	Florida Statutes, this <i>Fla</i>	rida Profit Corporation	adopts the following amo	endment(s)
. If amending name, enter the new name of	the corporation:			
N/A			The	new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "ovord "chartered," "professional association," or	"Corp," "Inc," or "Co	". A professional corpo	porated" or the abbrev	iation
		N/A .		
B. Enter new principal office address, if apple Principal office address MUST BE A STREET			N.	
			SECINO SECINO	<u>त</u> = ¬∩
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	AASS	
(maining unutess <u>MAT DE AT OST OF THE</u>	L BOA)			P III
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If amonding the registered event and/on we		. i- Florido44b	74	J
 If amending the registered agent and/or re new registered agent and/or the new registered. 		in riorida, enter the m	ame of the	
Name of New Registered Agent	FRANCIS BA	LBOA		
The state of the s	1666 KENNEDY CAU	SEWAY #100		
	(Florida street	address)		
	N. BAY VILLAGE		33141	
New Registered Office Address:	(City)		, Florida (Zip Code)	
	,			
ew Registered Agent's Signature, if changin	g Registered Agent:			
hereby accept the appointment as registered ag		and accept the obligation	ons of the position.	
	-m A			
		•		
	Signature of New Regi	stered 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 <math>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 Doe	
X Remove	<u>v</u>	Mike Jones	•
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PT	KEVIN BALBOA	1666 Kennedy Causeway #100
Add			N. Bay Village, FL. 33141
X Remove			
2) Change	РТ	FRANCIS BALBOA	1666 Kennedy Causeway #100
X Add			N. Bay Village, FL. 33141
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	***************************************		
Add			
Remove			
6) Change			
Add			
Remove			

	ar bricers, if necessary).	icles, enter chang (Be specific)				
	N/A					

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MAY 31st, 2016	10 1 1 1
	, if other than the
date this document was signed.	
MAY 31st, 2016	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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 adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. MAY 31st, 2016 Signature (By a director, president br 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 fiduciary) KEVIN BALBOA	FILED 16 JUN-1 PH 4: 12 SECRETARY OF STATE
· · · · · · · · · · · · · · · · · · ·	<u>.</u>
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	