## M36482

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| (City/State/Zip/Filone #)               |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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Office Use Only



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TO MAR -Z PH 1:41

SEE OF STATE-

## COVER LETTER

**ŤO:** Amendment Section Division of Corporations

| NAME OF CORP   | ORATION:P                             | ITTSBURGH                    | CHEMICALS I  | NCORPORATE                 | )   |
|--|---------------------------------------|------------------------------|--|----------------------------|---|
| DOCUMENT NU  | MBER:                                 | -36482                       |  |                            |   |
| The enclosed Artic   | les of Amendment                      | and fee are s                | ubmitted for fili                                    | ng.                        |   |
| Please return all co   | rrespondence conce                    | rning this m                 | atter to the follo                                   | wing:                      |   |
|  | PR                                    | IMAL K. G                    | ROVER  |                            |   |
|  |                                       | Name                         | of Contact Person                                    |                            |   |
|  | PITTS                                 | BURGH CHE                    | MICALS INCOR   | PORATED                    |   |
|  |                                       | F                            | irm/ Company   |                            |   |
|  | 12235                                 | NW 6                         |  | <u> </u>                   | ·   |
|  |                                       |                              | Address  |                            |   |
|  | MIAMI                                 | , FLORIDA                    |  | .,                         |   |
|  |                                       | ·                            | State and Zip Code                                   |                            |   |
| *****  | PK@pi<br>E-mail address:              | ttsburghc<br>(to be used for | hem, com<br>r future annual repo                     | rt notification)           | ·····   |
| For further informa  | ation concerning this                 | s matter, ple                | ase call:  |                            |   |
|  | RIMAL K, GROVER                       |                              | at ( 305   | ) 553-9755                 |   |
| Name   | of Contact Person                     |                              | Area Code  | e & Daytime Tele           | phone Number  |
| Enclosed is a check  | k for the following a                 | mount made                   | e payable to the                                     | Florida Depart             | ment of State:  |
| □\$35 Filing Fee   | S43.75 Filing Fe<br>Certificate of St | e &<br>atus                  | S43.75 Filing I<br>Certified Copy<br>(Additional cop | y                          | \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing A  | t Section                             |                              | Street Address Amendment S Division of Co            | ection                     |   |
| Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |                                       |                              | Clifton Buildin                                      | ng                         |   |
|  |                                       |                              | Tallahassee, F.                                      | e Center Circle<br>L 32301 | 5   |



February 22, 2010

PRIMAL GROVER 12235 NW 6 STREET MIAMI, FL 33182

SUBJECT: PITTSBURGH CHEMICALS INCORPORATED

Ref. Number: M36482

We have received your document for PITTSBURGH CHEMICALS INCORPORATED and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

The information about the new directors must be very clear.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 410A00004313

2010 MAR -1 AM 8: 00

## Articles of Amendment to Articles of Incorporation of

|  | of                |  |                                       | 基件 =              |             |
|--|-------------------|--|---------------------------------------|-------------------|-------------|
| DIMMORIDOU OUTVIOLE  | : THOOMS !!       | nrat.                                  |                                       |                   |             |
| PITTSBURGH CHEMICALS (Name of Corporation as curren  | <b>5 3</b>        | ~~~                                    |                                       |                   |             |
| (Hante of Corporation as Curren  | Hy Med With Li    | E PIOTIGA DEDLO                        | I State)                              |                   | (취)<br>[22] |
|  | 54.82             |  |                                       |                   | ति<br>होस्त |
| (Document Numb   |                   | n (if known)                           |                                       |                   |             |
|  |                   |  |                                       | 59 7              |             |
| Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:   | Florida Statute   | s, this <i>Florida Pr</i> e            | ofit Corporation                      | adopts the follow | wing        |
| A. If amending name, enter the new name of t   | he corporation    | i                                      |                                       |                   |             |
|  | NONE              |  |                                       | The new           |             |
| name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the dename must contain the word "chartered," "professions" | lesignation "Coi  | rp, " "Inc," or "Co                    | o". A profession                      |                   |             |
| B. Enter new principal office address, if applie   | rable:            | 12235 NW                               | 6 STREET                              |                   |             |
| (Principal office address MUST BE A STREET   |                   | 12233 111                              | <u> </u>                              | <del></del>       |             |
|  | /                 | MIAMI. FLO                             | RIDA 33182                            | <br> -            |             |
|  |                   |  |                                       |                   |             |
|  | ı                 |  |                                       |                   |             |
| <b></b>  |                   |  |                                       |                   |             |
| C. Enter new mailing address, if applicable:   | r nav             |  |                                       |                   |             |
| (Mailing address MAY BE A POST OFFICE  | 1. <i>BUX</i> ) _ |  |                                       | <del></del>       |             |
|  | _                 |  |                                       |                   |             |
|  | · <del>-</del>    | <del> </del>                           | <del></del>                           | <del></del>       |             |
|  | •                 |  | · · · · · · · · · · · · · · · · · · · | <del></del>       |             |
| D. If amending the registered agent and/or res   | zistered office a | ddress in Florida                      | enter the name                        | of the            |             |
| new registered agent and/or the new registe  |                   |  |                                       |                   |             |
|  |                   |  |                                       |                   |             |
| Name of New Registered Agent:  | PRIMAL K.         | GROVER                                 | ·····                                 |                   |             |
|  | 12235 NW          | 6 STREET                               |                                       |                   |             |
| New Registered Office Address:   | *******           | a street address)                      |                                       |                   |             |
| New Resistera Office Address.  | (FIOTIA           | u sireei aaaress)                      |                                       |                   |             |
|  | MIAMI             |  | , Florida                             | 33182             |             |
| <del>-</del>   | (City)            |  | (Zip Code)                            |                   |             |
|  | (//               |  |                                       |                   |             |
| New Registered Agent's Signature, if changing  |                   |  | <u>;</u> ·                            |                   |             |
| I hereby accept the appointment as registered age  | ent. I am famili  | ar with and accept                     | t the obligations o                   | of the position.  |             |
|  |                   | D 994                                  | <i>.</i> .                            |                   |             |
| Sia  | mature of New I   | Registered Agent, i                    | f changing                            |                   |             |
| U,g  | manare of 110W M  | ~8~w~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | CINCING III                           |                   |             |

## 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)

| Title                                  | Name   | Address                       | T:           | pe of Action  |
|--|--|-------------------------------|--------------|---------------|
| D                                      | SHIVANI GROVER   | 12235 N<br>MIAMI              |              | Add<br>Remove |
| D                                      | VISHAL GROVER  |                               |              | Add<br>Remove |
| <u>D</u>                               | VAISHALI K. CROV   | <u>12235 N</u> <u>MIAMI F</u> | 7            | Add<br>Remove |
|  | nding or adding additional Ar<br>additional sheets, if necessary).   |                               | ( <b>c</b> : |               |
| ······································ |  |                               |              |               |
|  |  |                               |              |               |
| provi<br>(if                           | amendment provides for an exsions for implementing the am foot applicable, indicate N/A)  CLASIFICATION OF ISSUE | endment if not contained      |              |               |
|  | · · · · · · · · · · · · · · · · · · ·  | AL K. GROVER                  | 3,825        | SHARES        |
|  |  | A GROVER                      | 2,550        | lt            |
|  | SHIV   | ANI GROVER                    | 375          | 11            |
|  | VISHA  | AL GROVER                     | 375          | 11            |
|  | VAISI  | HALI KIGROVER                 | 375          | tt .          |
|  |  | TOTAI                         |              | SHARES        |

| The date of each amendment(s)                          | ) adoption:   |
|--|---|
| Personal data is applicable.                           | ) adoption:   |
| Effective date <u>if applicable</u> : (                | no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                               | (CHECK ONE)   |
| The amendment(s) was/were by the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.   |
|  | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):  |
| "The number of votes ca                                | st for the amendment(s) was/were sufficient for approval  |
| by   | voting group)   |
| (n   | voting group)   |
| The amendment(s) was/were action was not required.     | adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/were action was not required.     | adopted by the incorporators without shareholder action and shareholder   |
| DatedF   | FEBRUARY 15, 2010   |
| Signature  | OP w  |
| select   | director, president or other officer — if directors or officers have not been ted, by an incorporator — if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) |
|  | PRIMAL K. GROVER  (Typed or printed name of person signing)   |
|  | PRESIDENT (Title of person signing)   |