P00000101651

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

Office Use Only



100213362421

10/20/11--01006--003 **43.75



(108/11)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	BELECH USA, INC.
DOCUMENT N	UMBER:	P00000101651
The enclosed Arti	icles of Amendment and fee a	are submitted for filing.
Please return all c	orrespondence concerning th	is matter to the following:
		DAVID JACOBS
	1	Name of Contact Person
	JACOBS NON	NES AND CARNEY CPAS LLP
		Firm/ Company
		6401 SW 87 AVE
		Address
		MIAMI, FL 33173
	C	City/ State and Zip Code
	E-mail address: (to be use	d for future annual report notification)
For further inform	ation concerning this matter,	please call:
***************************************	DAVID JACOBS	at (305) 274-1200
	e of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida Department of State:
□ \$35 Filing Fee	✓ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section
Division of Corporations		Division of Corporations
P.O. Box 6327		Clifton Building
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



BELECH USA, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P00000101651

(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:

name must be distinguishable and contain the word "corporation," "company," or "incorporated" abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporated 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:		FIRE EXPORT, INC.	The ne
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:	previation "Corp.," "Inc.," or Co.," or the	designation "Corp," "Inc," or "Co	". A professional corporation
(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 and/or the new registered office address: Name of New Registered Agent:		CE BOX)	
New Books and Office Address (Florida)	new registered agent and/or the new regist		enter the name of the
<u>New Registered Office Address</u> ; (Florida street address)	new registered agent and/or the new regist		enter the name of the
, Florida	new registered agent and/or the new regist		enter the name of the
(City) (Zip Code)	new registered agent and/or the new regist Name of New Registered Agent:	tered office address: (Florida street address)	, Florida

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	<u>Name</u>	Address	Type of Action
			_
			_ □ Add _ □ Remove
			_
(universalia)	itional sheets, if necessary). (Be speci		
	ndment provides for an exchange rec	lassification, or cancellation of is	sued shares
	for implementing the amendment if applicable, indicate N/A)		
	for implementing the amendment if		
	for implementing the amendment if		
	for implementing the amendment if		

	α
The date of each amendment(s)	
Effective date <u>if applicable</u> :	(date of adoption is required)
	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	,,
(ve	oting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
action was not required.	
Dated SEPTE Signature	ABER 7, 2011 Locules Lechles
(By a c selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	ROBERT LECHLER
	(Typed or printed name of person signing)
	PRESIDENT
_	(Title of person signing)