

# P11000055502

Florida Department of State  
Division of Corporations  
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ELETROMAR, INC.**

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*Amend*

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July 22, 2011

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

ELETTROMAR, INC.  
2144 NE 2ND AVENUE  
MIAMI, FL 33137

SUBJECT: ELETTROMAR, INC.  
REF: P11000055502

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Tina Roberts  
Regulatory Specialist II

FAX Aud. #: H11000186757  
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P.O. BOX 6327 - Tallahassee, Florida 32314

H11000186757

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

11 JUL 22 PM 4:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ELETTROMAR, INC.

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

P11000055502

(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:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name 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:

New Registered Office Address:

(Florida street address)

(City)

Florida  
(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

*Signature of New Registered Agent, if changing*

H11000186757

H11000186/3/

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP, T	TURINI, DANIELA	VIA GALILEO FERRARIS 30 FOLLONICA GR 58022 IT ITALY	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP, T	BETTI, MICHELE	Via Lavotiere, 41 Campiglia Marittima, LI 57021 ITALY	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  
(if not applicable, indicate N/A)

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THIRD: The date of each amendment's adoption: 7/22/11

FOURTH: Adoption of Amendment(s) (check one)

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.☐ The amendment(s) was/were approved by the shareholders through voting groups.

The following statement must be separately for each  
voting group entitled to vote separately on each amendment(s) :

"The number of votes cast for the amendment(s) was/were sufficient for  
approval by \_\_\_\_\_"  
(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.Dated 07/21/2011Signature Simone Turini

(If a director, president or 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)

SIMONE TURINI

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Page 3 of 3

H11000186757