P14000053477

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OLVISION OF CORPORATIONS

14 SEP 12 PH 3: 52

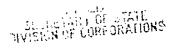
C.Lewis 14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PRECISIO	N IMPORTS US	INC				
DOCUMENT NUMBER: P1400005347	' 7					
The enclosed Articles of Amendment and fee are su						
Please return all correspondence concerning this ma	atter to the following:					
NEY DOS SANT	os					
	Name of Contact Person	1				
PRECISION IMP	PRECISION IMPORTS US INC					
	Firm/ Company					
5220 S University Dr suite 204C						
	Address					
Davie, FL 33328	}					
	City/ State and Zip Code	c				
ney@precisionimpor	ts.us					
	sed for future annual report	notification)				
For further information concerning this matter, please	se call:					
NEY DOS SANTOS	at (786	, 2478156				
Name of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for the following amount made	payable to the Florida Depa	urtment of State:				
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					

Articles of Amendment to Articles of Incorporation of



14 SEP 12 PM 3: 52

PRECISION IMPORTS US INC	
(Name of Corporation as currently filed with the F): P1400053477	prida Dept. of State)
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "O word "chartered," "professional association," or the abbreviation "I	To". A professional corporation name must contain the
	5220 S University Dr suite 204C
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Davie, FL 33328
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5220 S University Dr suite 204C
(manning train too interpretation of the control of	Davie, FL 33328
D. If amending the registered agent and/or registered office addraw registered agent and/or the new registered office address: Name of New Registered Agent 5220 S Universi	
New Registered Office Address: Davie (City)	ret address), Florida 33328(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Signature of New Registered Agent.	

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)

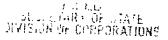
Please note the officer/director title by the first letter of the office title:

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	PT	John Do	<u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	1145	
X Add	<u>sy</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
Change Add				and the same development of the same.
Remove				
2) Change		_		
Add Remove				
3) Change				
Add Remove				
4) Change				
Add		_		
Remove				
5) Change				M-147
Remove				
6) Change		_		
Add				
Remove				

If amo	ending or adding additional h additional sheets, if necessar	Articles, enter ch	ange(s) here:		
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If an	amendment provides for an	exchange, reclas	sification, or can	cellation of issued s	hares,
prov	visions for implementing the (if not applicable, indicate N/	amendment if no	t contained in th	e amendment itself	<u>.</u>
	(у посиррясите, такие ж	,			
					···



The date of each amendment(s) date this document was signed.	adoption: 09/01/2014	14 SEP 12 PN 3+52	, if other than the
	9/01/2014		
Effective date <u>if applicable</u> :		lays after amendment file date)	<u> </u>
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were aby the shareholders was/were		umber of votes cast for the amendment(s)	
	approved by the shareholders throug for each voting group entitled to vot	th voting groups. The following statement te separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were s	sufficient for approval	
by		"	
	(voting group)		
The amendment(s) was/were action was not required.	adopted by the board of directors wi	thout shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators withou	t shareholder action and shareholder	
Dated 09/01	/2014		
Signature	(//apls)los		
sele	a director, president or other officer cted, by an incorporator – if in the h ointed fiduciary by that fiduciary)	- if directors or officers have not been ands of a receiver, trustee, or other court	
	NEY FERREIRA DOS S	ANTOS	
	(Typed or prin	nted name of person signing)	········
	VICE PRESIDENT		
	(Title	of person signing)	