## P08000055026

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| Certified Copies        | _ Certificates     | s of Status                           |
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| Special Instructions to | Filing Officer:    |                                       |
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Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 7, 2008

MARITZA AQUDO 3438 S.W. 24 TERRACE MIAMI, FL 33145

SUBJECT: ACES AMERICAS TECHNOLOGY PLATFORM TRADESHOW INC

Ref. Number: P08000055026

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

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) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 208A00052891

## COVER LETTER

| TO: Amendment Section Division of Corporations |  |
|--|--|
| SUBJECT: CHANGE OF FIC.                        | ETC IVAME  Jame of Corporation)                            |
| DOCUMENT NUMBER: POB                           | 0000 55026   |
| The enclosed Articles of Correction and fe     | ee are submitted for filing.                               |
| Please return all correspondence concerning    | ng this matter to the following:                           |
| MARITZA Agu (Name of Contact Person)           | ido  |
| ACES-AMERICAS TO                               | ECHNOlogy PLAT FORM TRADESHOWE IN                          |
| 3438 SW 24 TA                                  |  |
| MIAMI PLORIDA (City/State and Zip Code)        | 4 33145  |
| For further information concerning this ma     | atter, please call:  |
| MARITZA Agudo (Name of Contact Person)         | at ( 305) 262 3200 (Area Code & Daytime Telephone Number)  |
| Enclosed is a check for the following amount   | unt:   |
| \$35.00 Filing Fee                             | \$43.75 Filing Fee & Certificate of Status                 |
| \$43.75 Filing Fee & Certified Copy            | \$52.50 Filing Fee, Certificate of Status & Certified Copy |
| 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

| ACES AMERICAS TO  | ECH NO  | ogy Plat                     | form Trad                             | eshow-           |
|---|---|------------------------------|---------------------------------------|------------------|
| (Name of Corporation as curre   |   |                              | · · · · · · · · · · · · · · · · · · · |                  |
| P080000   | 550   | 26                           |                                       |                  |
| (Document Num   | ber of Corporation                            | (if known)                   |                                       |                  |
| Pursuant to the provisions of section 607.1006 following amendment(s) to its Articles of Incorp   |   | , this <i>Florida Profit</i> | Corporation adopts                    | the              |
| A. If amending name, enter the new name of  A. C. S A. M. B. R. C. A.  The new name must be distinguishable an "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A." | TECHNOLOGIAN CONTRACTOR OF THE STATE OF CO.," | or the designation "         | "company," or<br>'Corp," "Inc," or    | DINC.            |
| B. Enter new principal office address, if appl<br>(Principal office address MUST BE A STREET  |   |                              | 98                                    |                  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC   |   |                              | CT 21 AM 9: 53                        |                  |
| D. If amending the registered agent and/or renew registered agent and/or the new registered   |   |                              | ter the name of the                   |                  |
| Name of New Registered Agent:   | <u></u>                                       |                              |                                       |                  |
| New Registered Office Address:  | (Florida                                      | street address)              | _                                     |                  |
|   |   | (2)                          | _, Florida                            |                  |
|   | (   | (City)                       | (Zip Code)                            |                  |
| New Registered Agent's Signature, if changin I hereby accept the appointment as registered position.  |   |                              | pt the obligations of                 | <sup>e</sup> the |
|   | ignature of New Re                            | egistered Agent, if cha      | <br>เทศเทศ                            |                  |

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> | Name   | Address                                   | Type of Action        |
|--------------|--|---|-----------------------|
| SEC.         | MichAEL FINOCCHIA  | 20 3438 SW<br>ZY TERRACE<br>MIAMI FLZZIV  | Add. Remove           |
| SEC          | Name<br>MICHAEL FINOCCHIAN<br>ELEANOR TERMINI  | 3438 SW<br>34 TERRACE<br>141 PAU E   3314 | Add Remove            |
| -            |  |   | _ 🔲 Add<br>_ 🔲 Remove |
|              | nding or adding additional Articles, enter additional sheets, if necessary). (Be specificational sheets)       |   |                       |
|              |  |   |                       |
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|              |  | •   |                       |
| -            |  |   |                       |
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|              |  |   |                       |
| provis       | imendment provides for an exchange, reclions for implementing the amendment if renot applicable, indicate N/A) |   |                       |
|              |  |   |                       |
|              |  |   |                       |
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|              |  |   |                       |

| The date of each amendment                             | (s) adoption: 10 - 16 - 0 C  |
|--|--|
| Effective date if applicable:                          |  |
|  | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                               | (CHECK ONE)  |
| The amendment(s) was/wer<br>by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.   |
| The amendment(s) was/wer must be separately provide    | re approved by the shareholders through voting groups. The following statement d 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)   |
| action was not required.                               | re adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder  |
| Dated Signature (By sele                               | a director, president or other officer – if directors or officers have not been cited, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary) |
|  | MARITZA AGUDO (Typed or printed name of person signing)  (Title of person signing)   |
|  | (The of person signing)  |