## 031178

| (Re                     | equestor's Name)   |             |  |
|-------------------------|--------------------|-------------|--|
| (Ac                     | ddress)            |             |  |
| (Ac                     | ddress)            |             |  |
| (Ci                     | ty/State/Zip/Phone | e #)        |  |
| PICK-UP                 | ☐ WAIT             | MAIL        |  |
| (Business Entity Name)  |                    |             |  |
| (Do                     | ocument Number)    |             |  |
| Certified Copies        | Certificates       | s of Status |  |
| Special Instructions to | Filing Officer:    |             |  |
|                         |                    |             |  |
|                         |                    |             |  |
|                         |                    |             |  |
|                         |                    |             |  |
|                         |                    |             |  |

Office Use Only



300261381873



300261381873 06/26/14--01032--001 \*\*35.00

Amend Man 1414

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR   | <sub>ATION:</sub> Euroatlar  | ntic, Inc.   |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  |  | uhmitted for filing  |  |  |  |  |  |
|  | The enclosed <i>Articles of Amendment</i> and fee are submitted for filing.  Please return all correspondence concerning this matter to the following: |  |  |  |  |  |  |
|  | -  | atter to the following.  |  |  |  |  |  |
| -  | Tim Henkel   |  |  |  |  |  |  |
|  |  | Name of Contact Perso  | n  |  |  |  |  |
| _  |  | Firm/ Company  |  |  |  |  |  |
| ·  | 18001 Old Cut  | ler Road, Sui  | te 600   |  |  |  |  |
| ,  | Minus: Minuida   | Address  |  |  |  |  |  |
| <u> </u>   | Miami, Florida   | · · · · · · · · · · · · · · · · · · ·                              |  |  |  |  |  |
|  | <b>~</b>   | City/ State and Zip Cod  |  |  |  |  |  |
| tan  | @miamibusine   | esslitigators.co   | om   |  |  |  |  |
|  | E-man address. (to be us   | sed for future annual report                                       | notification)  |  |  |  |  |
| For further information  | concerning this matter, pleas  | se call:   |  |  |  |  |  |
| Tim Henkel   |  | ar (305  | <u>971-9474</u>  |  |  |  |  |
| Name of  | Contact Person   | Area Co  | de & Daytime Telephone Number  |  |  |  |  |
| Enclosed is a check for  | he following amount made   | payable to the Florida Depa  | artment of State:  |  |  |  |  |
| ■ \$35 Filing Fee  | □\$43.75 Filing Fee & Certificate of Status  | ☐\$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 |  | Amend<br>Divisio<br>Clifton<br>2661 E                              | Address Iment Section on of Corporations Building xecutive Center Circle assec, FL 32301 |  |  |  |  |

## Articles of Amendment to Articles of Incorporation of



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

(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:

N/A

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)

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.

Lin D. Hunke

Signature of New Registered Agent, if changing

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>oe</u>                  |                      |
|----------------------------|--------------------------|-------------|----------------------------|----------------------|
| X Remove                   | $\underline{\mathbf{V}}$ | Mike Jo     | ones .                     |                      |
| X Add                      | <u>sv</u>                | Sally Sr    | <u>nith</u>                |                      |
| Type of Action (Check One) | Title                    |             | Name                       | Address              |
| 1) Change                  | PD                       | <del></del> | Francisco Machado Da Cruz  | 1395 Brickell Avenue |
| Add                        |                          |             |                            | Suite 200            |
| Remove                     |                          |             |                            | Miami, FL 33131      |
| 2) Change                  | P                        | _           | Joseph A. Senker           | 1395 Brickell Avenue |
| Add                        |                          |             |                            | Suite 200            |
| Remove                     |                          |             |                            | Miami, FL 33131      |
| 3) Change                  | D                        | _           | Jorge Espirito Santo Silva | 1395 Brickell Avenue |
| <b>✓</b> _ Add             |                          |             |                            | Suite 200            |
| Remove                     |                          |             |                            | Miami, FL 33131      |
| 4) Change                  |                          | _           |                            |                      |
| Add                        |                          |             |                            |                      |
| Remove                     |                          |             |                            |                      |
| 5) Change                  |                          |             |                            |                      |
| Add                        |                          |             |                            |                      |
| Remove                     |                          |             |                            | ·                    |
| 6) Change                  |                          | _           |                            |                      |
| Add                        |                          |             |                            |                      |
| _ Remove                   |                          |             |                            |                      |

| E. If amending or adding additional Arti-      | cles, enter change(s) here:                               |
|--|---|
| (Attach additional sheets, if necessary).  N/A | (Be specific)   |
| 10/7   |   |
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| F. If an amendment provides for an exch        | ange, reclassification, or cancellation of issued shares, |
| (if not applicable, indicate N/A)              | ndment if not contained in the amendment itself:          |
| N/A  |   |
|  |   |
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| • | The date of each amendment(s) adoption: April 17, 2017   | _, if other than the |
|---|--|----------------------|
|   | date this document was signed.   |                      |
|   | Effective date if applicable: May 1, 2014  (no more than 90 days after amendment file date)  | _                    |
|   | (no more than 90 days after amendment file date)   |                      |
|   | Adoption of Amendment(s) (CHECK ONE)   |                      |
|   | The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.   |                      |
|   | The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)   |                      |
|   | 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.   |                      |
|   | TUNE 20 2014   |                      |
|   | Signature Signature  |                      |
|   | (By a director, president or other officer - if directors or officers have not been  | <del>-</del>         |
|   | selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)   |                      |
|   | Joseph A. Senker   |                      |
|   | (Typed or printed name of person signing)  | _                    |
|   | President  |                      |
|   | (Title of person signing)  | _                    |