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To:

Division of Corporations

Fax Number

: (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN SCHOLLE PACKAGING, INC.

Certificate of Status	0
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I ALBRITTON

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Corporate Filing Menu

Help

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

	F05000006131		
(Document number of corporation (if known)			
1. Scholle Packaging, Inc.			高高
1	(Name of corporation as it app	pears on the records of the Department of Sta	ue) Kit co
2. Nevada			
2. (Inc	orporated under laws of)	3. (Date authorized to do	business in Florida)
			5 5
		SECTION II	
	(4-7 COMPLETE OF	NLY THE APPLICABLE CHANGES)	
its jurisdiction of inc. Scholle IPN Packaging, (Name of corporatio	corporation? January 19, 2016 Inc.	ng suffix "corporation," "company,"	
(If new name is unav business in Florida)	ailable in Florida, enter alter	nate corporate name adopted for the p	purpose of transacting
6. If the amendment ch	anges the period of duration,	, indicate new period of duration.	
		(New duration)	
7. If the amendment ch	anges the jurisdiction of inco	orporation, indicate new jurisdiction.	
	(New jurisdiction)	
 Attached is a certific 90 days prior to delive having custody of co 	ate or document of similar in very of the application to the rporate records in the jurisdi	mport, evidencing the amendment, au Department of State, by the Secretary ection under the laws of which it is inc	thenticated not more than y of State or other official corporated.
	Jerry /	routhele	
	(Signature of a director, of a receiver or other co	president or other officer - if in the hands ourt appointed fiduciary, by that fiduciary)	
Jerry Trousdale		Vice President and C.F	.o.
(Typed of no	inted name of person signing)	(Title of person s	signing)

STATE OF NEVADA

BARBARA K. CEGAVSKE Secretary of State



JEFFERY LANDERFELT Deputy Secretary for Commercial Recordings

Certified Copy

April 7, 2016

Job Number:

C20160406-0258

Reference Number: 00010265084-26

Expedite:

Through Date:

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

Document Number(s) 20160022920-44

Description Amendment

Number of Pages 1 Pages/1 Copies

Certified By: Raphael Alves Certificate Number: C20160408-0258 You may verify this certificate online at http://www.nvaos.gov/

Respectfully,

BARBARA K. CEGAVSKE Secretary of State

Commercial Recording Division 202 N. Carson Street Carson City, Nevada 89701-4201 Telephone (775) 684-5708 Fax (775) 684-7138





BARBARA K. CEGAVSKE Secretary of State. 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708 Websits: www.nvsos.gov

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20160022920-44

Barbara K. Cegavske Secretary of State State of Nevada

Filing Date and Time 01/19/2016 10:18 AM

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E0646472005-4

(PURSUANT TO NRS 78.385 AND 78.390)

Certificate of Amendment

USE BLACK BIK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE CHLY

Certificate of Amendment to Articles of Incorporation For Nevada Profit Corporations (Pursuant to NRS 78.385 and 78.390 - After Issuance of Stock)

1. Name of corporation:		angun gunggi ya nasuya ayo, ya yahaganya a Addan Addah da An deshiyi cida danasidi at di disadikatika kata his
SCHOLLE PACKAGING, INC.		
2. The articles have been amended as follows	3: (provide article number	s, if evaluable)
The new name of the corporation is SCHOLLE IF	N PACKAGING, INC.	
A THE RESIDENCE AND A STREET OF THE STREET O	· •	states a fact part of the statement with
3. The vote by which the stockholders holding at least a majority of the voting power, or surrequired in the case of a vote by classes or searticles of incorporation* have voted in favor of	ch greater proportion eries, or as may be re	of the voting power as may be
4. Effective date and time of filing: (optional)	Date:	Time:
The state of the s	, ,	90 days after the certificate is fied)
5. Signature: (required)	•	·
x to to		
Stonature of Officer		

"If any proposed amendment would after or change any preference or any relative or other right given to any class or series of outstanding shares, then the amendment must be approved by the vote, in addition to the affirmative vote otherwise required, of the holders of shares representing a majority of the voting power of each class or series affected by the amendment regardless to Rimitations or restrictions on the voting power thereof.

IMPORTANT: Failure to include any of the above information and submit with the proper fees may cause this filing to be rejected. Nevada Secretary of State Amend Profit-After Revised: 1-5-15 This form must be accompanied by appropriate feas.