

F 11 000000 2607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

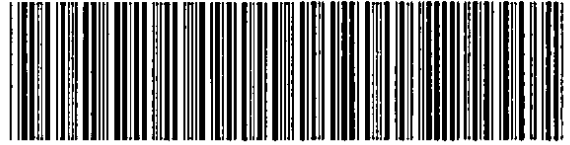
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

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Office Use Only



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REGISTRATIONS
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D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SBT USA INC.

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Hernandez

 Name of Contact Person
 SBT USA INC.

 Firm/ Company
 612 SW 17th Ave.

 Address
 Miami, FL 33135

 City/ State and Zip Code
 Hernandez1111@sbtjapan.com

 E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Hernandez at (786) 527-2800

 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

Street Address
 Amendment Section
 Division of Corporations
 The Centre of Tallahassee
 2415 N. Monroe Street, Suite 810
 Tallahassee, FL 32303

2011/01/16 PM 12:09

SBT USA INC. 0092741495



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 FEB 24 11:30

February 24, 2020

MARK HERNANDEZ
SBT USA INC.
612 SW 17TH AVE
MIAMI, FL 33135

SUBJECT: SBT USA INC.
Ref. Number: F11000002607

We have received your document for SBT USA INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Corporation, but your entity is a Foreign Corporation. Please complete and return the enclosed blank form(s).

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) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 420A00004090

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)

F11000002607

(Document number of corporation (if known))

1. SBT USA INC.

(Name of corporation as it appears on the records of the Department of State)

2. CALIFORNIA 3. JUNE 24, 2011

(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____

5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:
ADDING PREVIOUSLY REMOVED AGENT/DIRECTOR/OFFICER BACK IN

9. **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 WATARU NOGUCHI

612 SW 17th Ave, Miami, FL 33135

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (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.

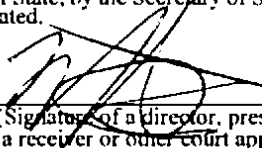


Signature of New Registered Agent, if changing

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STATE OF FLORIDA
SECRETARY OF STATE

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
D	WATARU NOGUCHI	612 SW 17th Ave, Miami, FL 33135	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
CEO	WATARU NOGUCHI	612 SW 17th Ave, Miami, FL 33135	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
CFO	WATARU NOGUCHI	612 SW 17th Ave, Miami, FL 33135	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.


 (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

MARK HERNANDEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE \$35.00