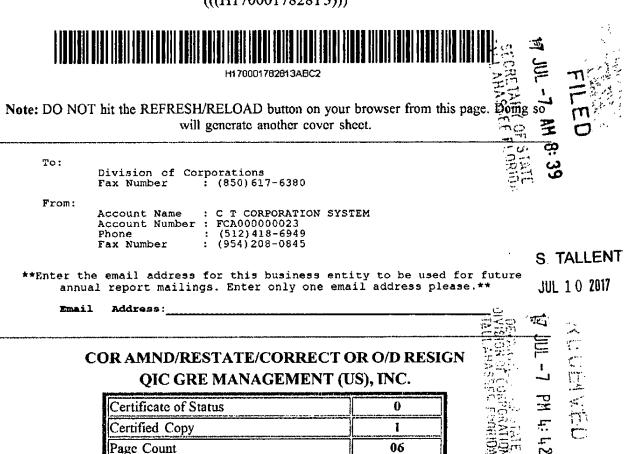
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170001782813)))



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\$43.75

To: Page 5 of 8

COVER LETTER

Division of Corporations	
SUBJECT: QIC GRE MANAGEMENT (US), IN	
Name	of Corporation
DOCUMENT NUMBER: F12000001	993
The enclosed Amendment and fee are subm	itted for filing.
Please return all correspondence concerning	this matter to the following:
FRANCIS O'SULLIVAN	
Name of Contact Person	P-P-9-14-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
фіс іймітер	
Firm/Company	
12 EAST 49th STREET, 36 FLOOR	
Address	Management of the stage of the
NEW YORK, NEW YORK 10017	•
City/State and Zip Code	***************************************
CORPORATESECRETARIAT2@QIC.COM	/
E-mail address: (to be used for future annu	al report notification)
For further information concerning this matter	er, please call:
FRANCIS O'SULLIVAN	212 224 8900 at ()
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	ıt:
\$35.00 Filing Fee Certificate of Status	
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, Ft. 32301

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)			
F12000001993			
(Document number of corporation (if known)			ARY SSE
L. QIC GRE MANAGEMENT (US), INC.		
(Nam	e of corporation as it appears o	on the records of the Department of State)	9 H
2 MARYLAND		9 3. 10 MAY 2012	39
(Incorporated	under laws of)	(Date authorized to do busin	ess in Florida)
		TION IL THE APPLICABLE CHANGES)	
4. If the amendment changes to	he name of the corporation	n, when was the change effected und	er the laws of
its jurisdiction of incorpora	tion? <u>7/7/17</u>		
5. QIC CORPORATE MANAGEM	ENT, INC.		
(Name of corporation after appropriate abbreviation, i	the amendment, adding su f not contained in new nat	iffix "corporation." "company," or "ime of the corporation)	ncorporated," or
(If new name is unavailable business in Florida)	in Florida, enter alternate	corporate name adopted for the purp	ose of transacting
6. If the amendment changes t	he period of duration, indi	icate new period of duration.	
	(Nev	v duration)	•
7. If the amendment changes t	he jurisdiction of incorpor	ration, indicate new jurisdiction.	
	(New:	jurișdicțion)	
8. Attached is a certificate or 90 days prior to delivery of having custody of corporate	locument of similar importune application to the Dep records in the jurisdiction	rt, evidencing the amendment, auther arriment of State, by the Secretary of munder the laws of which it is incorp	iticated not more than State or other official orated.
	(Signature of a director, presi	ident or other officer - if in the hands ppointed fiduciary, by that fiduciary)	
WILLIAM THOMAS BURTON	or a sectives of omes court g	SECRETARY	
(Typed or printed na	me of person signing)	(Title of person signi	ngı

(6) Return address of filing party:

12 EAST 49th STREET, 36 FLOOR

NEW YORK, NEW YORK, 10017

QICTAMITED

•	lhe corporation is hereby		DWS:		
OIC CORPORATION	E OF CORPORATION TO ANAGEMENT, INC.	:			
	•				
				•	
	•				
			•		
		•			•
			•		
	the charter of the corpoi SUR COA NOTTAROUND:		•		

ARTICLES OF AMENDMENT

	STATE OF MARYLAND	
I hereby certi	fy that this is a true and complete copy of the on file in this office DATED: TE DEPAREMENT OF ASSESSMENTS AND REMATION	to-
BY:	Custo Caces our previous certification system. Effective:	

CUST ID:0003564761 WORK ORDER:0004781338 DATE:07-07-2017 12:54 PM RMT. PAID:\$575.00

** EXPEDITED SERVICE **	** KEEP WITH DOCUMENT **
DOCUMENT CODE 39A BUSINESS CODE 03	Affix Barcode Label Here
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Merging (Transferor)	· ·
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Surviving (Transferee)	
	New Name OIC CARPORNAZ
	Management Inc
FEES REMITTED	
Base Fee:	Change of Name
Org. & Cap Fee:	Change of Principal Office
Expedite Fee: 975	Change of Resident Agent Change of Resident Agent Address
State Recordation Tax:	Resignation of Resident Agent Designation of Resident Agent
State Transfer Tex: Certified Copies	and Resident Agent's Address
Copy Fee: 22	Change of Business Code
Certificate of Status Fee:	Adoption of Assumed Name
Personal Property Filings: Mail Processing Fee:	
Other:	Other Change(s)
TOTAL PEES:	
Credit Card Check Cash	Code 007
Documents on Checks	Attention:
	Mail: Names and Address
Approved By:	
Keyed By:	·
COMMENT(S):	
2 1/5 - Specite	
2 Hove Expedite	
	· · · · · · · · · · · · · · · · · · ·
	CUST ID:0003564761 WORK ORDER:0004781338
	DATE:07-07-2017 12:54 PM AMT. PAID:\$575.00
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