## 416000197639

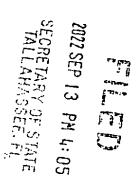
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## COVER LETTER

	Registration Se Division of Co						
SUBJEC	NBX-USA			,			
SUBJEC	. 11	-					
The enclo	osed Articles of	Amendment and fee(s) are sul	bmitted for filing.				
Please re	turn all correspo	ondence concerning this matter	r to the following:				
		FABRICE HERZSTEIN					
			Name of Person		-		
			Firm Company	·	_		
		20803 BISCAYNE BLVI	D, SUITE 440		(c)	21	
			Address		ECR!	)22 SI	÷0
		AVENTURA, FL, 33180			LAH	EP T	<u>-</u>
City-State and Zip Code FABRICE@MCHCONSULTINGUSA.COM						3 PH	Trave Bush Bush
For furthe	er information e	E-mail address; oncerning this matter, please c	(to be used for future annual report no call:	tification)	STATE	2022 SEP 13 PH 1: 05	٤
FABRIC	E HERZSTEIN		786 785-5000				
	Name o	f Person	Area Code Dayn	me Telephone Numbe	Г		
Enclosed	is a check for th	ne following amount:					
		□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certificaddinonal copy is enclosed) Certification.		Filing Fee, icate of Status & led Copy mal copy is enclosed)		
Mailing Address: Registration Section		Street Address: Registration S	ection				
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Division of Co				
			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NBX-USA LLC	
( <u>Name of the Limited Liability Company a</u> (A Florida Limited Liabi	is it now appears on our records.) dity Company)
The Articles of Organization for this Limited Liability Company we lorida document number $\frac{1.16000197639}{1.16000197639}$ .	re filed on 10/26/2016 and assigned
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability	company here:
he new name must be distinguishable and contain the words "Limited Liability C	Company," the designation "L.L.C." or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
nter new mailing address, if applicable:	22 SEP 13 PH 4: 05 CRETARY OF STATE ALLAHASSEE, FL
. If amending the registered agent and/or registered office addi <u>gent and/or the new registered office address here</u> :	ress on our records, <u>enter the name of the new regis</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Circ

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person\_being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	RUBEN VERHELST	SINT-ALDEGONDISKAAI36	
		ANTWERP, OC	_
			□Change
MGR	JAN DE MEY	SCHEPPERSTEDE 3	<b>■</b> Add
		MERELBEKE, 9820, BELGIUM	□Remove
			□Change
MGR	MARC FERLET	93 RUE DE SEINE	<b>■</b> Add
		PARIS, 75006, FRANCE	□Remove
		·	□Change
			□Add
			SECRETARY OF STATE
			☐ S □Remove
<del>-</del>			
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the record is filed. Dated \_\_\_ f a member of authorized representative of a member ERIK SAELENS

Typed or printed name of signee