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MAY 23 YOU T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	MERICAN CHAME	BER OF COMMERCE, INC.
DOCUMENT NUMBER: N1000009	624	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
OVIDIU T. LEBADA		
	(Name of Contact Person	n)
ROMANIA USA CHAMBER OF COMME	RCE OF FLORIDA	AND THE AMERICAS, INC.
	(Firm/ Company)	
1581 NW 132 AVE		
	(Address)	
PEMBROKE PINES, FL	33028	
	(City/ State and Zip Cod	е)
lebadausa@como	ast.net	
E-mail address: (to be used		notification)
For further information concerning this matter, please of	call:	
OVIDIU T. LEBADA	_{at} 954	594-2409
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Depa	urtment of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations	Amend	Address ment Section n of Corporations

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

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ROMANIAN-AMERICAN CHAMBER OF COMMERCE, INC.

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

— SEGRETARY OF STATE TALLAHASSEE HLORIDA

N10000009624 (Document Number of Corporation (if known)

Pursuant to the provisions of section 617 amendment(s) to its Articles of Incorpor		Not For Profit Corporation adopts the following
A. If amending name, enter the new particles of the		A AND THE AMERICAS, INC. The new
	in the word "corporation" or "inco	porated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address (Principal office address MUST BE A.)	. if applicable: STREET ADDRESS)	
		
C. Enter new mailing address, if app (Mailing address MAY BE A POST		
	-	
D. If amending the registered agent a new registered agent and/or the n		Torida, enter the name of the
Name of New Registered Agent	<u> </u>	
New Registered Office Address:	(Florida street aa	dress)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if I hereby accept the appointment as regi	changing Registered Agent: stered agent. I am familiar with and	d accept the obligations of the position.
<u>.</u>	ignature of New Registered Agent, if	changing

Page 1 of 4

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 <math>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: XChange	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add Remove			
2) Change Add Remove			
3)ChangeAdd			
Remove 4) Change			
Add Remove			
5) Change Add Remove	~.		
6) Change			
Add Remove			

if amending or adding additional Art attach additional sheets, if necessary).	(Be specific)
	
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·····	

The	e date of each amendmen	t(s) adoption: 04/01/2012	!
Eff	ective date <u>if applicable</u> :	04/01/2012	
	<u>a herarita</u> .	(no more than 90 day	s after amendment file date)
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/was/were sufficient for a		he number of votes cast for the amendment(s)
	adopted by the board of		mendment(s). The amendment(s) was/were
	Dated	idiu T. Lebada	Organity algoral by Chichi T. Loboda. Diff con-Ondrio T. Loboda. Diff con-Ondrio T. Loboda. Diff SHO-Ondrio T. Loboda. Diff AIRTICAS, 40C., see, media-blacksure@concert.net, chicki Distr. 2012 (55.15 150.557 2 0000
	(By the		board, president or other officer-if directors or – if in the hands of a receiver, trustee, or iduciary)
	OVIDIU	J T. LEBADA	
		(Typed or printed name of p	person signing)
	PRESI	DENT	
		(Title of person signing)	