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SEP. 3 0 2014

R. WHITE

TA SEP 29 PM 2: 3



September 19, 2014

MICHAEL REPPAS II 100 S. PINE ISLAND RD STE 202 PLANTATION, FL 33324

SUBJECT: INTERORIENT MARINE SERVICES (USA), INC.

Ref. Number: P00000102333

We have received your document for INTERORIENT MARINE SERVICES (USA), INC. and your check(s) totaling \$10.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$25.00 is due.

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.

Letter Number: 714A00020153

Rebekah White Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section
Division of Corporations

INTERORIENT MARINE SERVICES (USA), INC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL REPPAS II

Name of Person

REPPAS & BRANNELLY, PLLC

Firm/Company

100 S. PINE ISLAND RD. SUITE 202

Address

PLANTATION, FL 33324

City/State and Zip Code

michael@reppasbrannellylaw.com

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

For further information concerning this matter, please call:

MICHAEL REPPAS

at (305)

822-8422

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

□ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	D00001022		VICES (USA), INC.		
•	of Amendment and fee are su	bmitted for filing.			
	spondence concerning this mat	•			
	MICHAEL J. REPPAS				
		Name of Contact Persor			
	REPPAS & BRANNELLY, PLLC				
		Firm/ Company			
	100 S. PINE ISLAND RD., SUITE 202				
	<u> </u>	Address			
	PLANTATION, FI	LORIDA 33324			
	<u> </u>	City/ State and Zip Code	2		
mic	chael@reppasbrar	nnellvlaw.com			
		ed for future annual report	notification)		
	`	·			
For further information	n concerning this matter, pleas	e call:			
MICHAEL J. REPPAS at (305) 822-8422					
Name of Contact Person Area Code & Daytime Telephone Num					
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	ertment 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)		
Ma	iling Address	Street	Address		
	endment Section	Amendment Section			
	ision of Corporations	Division of Corporations			
	. Box 6327	Clifton Building			
Tan	ahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment Articles of Incorporation

FILED 14 SER 29 PH 2: 35

INTERORIENT MARINE SERVICES (USA), INC.

	currently filed with the Flo		, , , , , , , , , , , , , , , , , , ,	उसारामः
P00000102333				_
(Document	Number of Corporation (if k	(nown)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Fl	orida Profit Corporation a	dopts the following	g amendment(s) to
A. If amending name, enter the new name	me of the corporation:			
N/A				The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designo word "chartered," "professional associat	ation "Corp," "Inc," or "Co	o". A professional corpor		bbreviation
B. Enter new principal office address, i	f annlicable:	N/A		
(Principal office address MUST BE A ST				-
C. Enter new mailing address, if applic		N/A		
(Mailing address MAY BE A POST O	PFFICE BOX)			-
				<u>-</u>
D. If amending the registered agent and	Var registered affice addres	s in Florida, enter the na	me of the	
new registered agent and/or the new		s in Fronting enter the na	ine of the	
Name of New Registered Agent	MICHAEL J. REP	PAS	_	
	100 S. PINE ISLAN	D RD., SUITE 202	-	
	(Florida stree	t address)	-	
New Registered Office Address:	PLANTATION	. Florida	33324	
	(City)	,	(Zip Code)	-
New Registered Agent's Signature, if ch	anging Registered Agent			
I hereby accept the appointment as registe	red agent. I am amiliar wit	h and accept the obligation	ns of the position.	
	~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Sig	nature of New Registered Ag	ent, if changing		

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 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: X Change	PT	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	<u>ies</u>	
_X Add	<u>sv</u>	Sally Sm	<u>uith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				, , . , ,
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
[_		
Ĺ Add ┌──				
Remove				

(Atta	ending or adding additional Articles, enter change(s) here: h additional sheels, if necessary). (Be specific)
N/A	
	·
· ···	
·····	
. <u>If ar</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pre	visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A	(y not applicable, maicule (vzi)
<u> </u>	

The date of each amendment date this document was signed.		, if other than the
Effective date if applicable:	08/01/2014	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	•
by		
•	(voting group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated_SEP	TEMBER 23, 2014	
Signature	y a director, president or other officer – if directors or officers have not been	_
se	lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	MICHAEL J. REPPAS	
	(Typed or printed name of person signing)	
	REGISTERED AGENT	
	(Title of person signing)	<u>—</u>