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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Adrex 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:
Stephanie Dariss-Bisso Name of Contact Person Adrew USA Inc
Firm/ Company
4686 Autumndale D
Pace F1 32571 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stephnie Nariss-Bisso <sub>at</sub> (850) 206 2510  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 Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Horry USA I	nc.		
•		h the Florida Dept. of State)	
·	<u>00000627</u>		
(Do	ocument Number of Corporati	on (if known)	
Pursuant to the provisions of section 607.1006. Floats Articles of Incorporation:	orida Statutes, this <i>Florida Pr</i>	cofit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new name of th	<u>le corporation:</u>		
ESHREDRISH STATE HER ING HARRIER GRESS HASSENSOO, CHSSES WELVESTS WE REHUSSELESSEN WESTELS WELVESTS DE MELESENS		rofessional corporation name m	The new  The new  with the new  with the
B. Enter new principal office address, if applications of the principal office address MUST BE A STREET A	able: 4 <i>DDRESS</i> )		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	(BOX)		19 JH 22 0H 3
D. If amending the registered agent and/or reginew registered agent and/or the new register	istered office address in Flor	ida, enter the name of the	
Name of New Registered Agent			
-	(Florida street address)		
New Registered Office Address:	(Circ)	, Florida	<del></del>
	(City)	12	Lip Code)
hereby accept the appointment as registered agen		cept the obligations of the position	on.
· · · · · · · · · · · · · · · · · · ·	ignature of New Registered A	and if the	<u> </u>

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 officeredirector 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: $\underline{X}$ Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			<del>-</del>
Remove	•		
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			

Attach <i>additional sh</i>	eets, if necessary).	icles, enter change (Be specific)	<del></del>		
	NA				
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an amendment pr	ovides for an eych	ange reclassificat	ion or cancellation	on of icruad chara	
<u>rovisions for impl</u>	ementing the amer	ndment if not cont	ained in the amer	ndment itself:	<u>3</u> 3
(if not applicabl	e, indicate N/A)				
Pietro	<u> Bisso</u>	51 s ss. Bisso	shares		
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		···	<del></del>	<u> </u>	
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			-		<u>-</u>

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date [FREE STATE FOR THE PROPERTY OF	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
STATE OF THE PROPERTY OF THE P	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 1/6/19	
Signature (By a director, president or other officer of directors or officers have not been selected, by an incorporator of the hands of a receiver, trustee, or other court	<del></del>
appointed fiduciary by that fiduciary)	
Stephanie Norriss- Br (Typed or printed name of person signing)	<u> </u>
(1) per or printed faint or person signing)	
<u> </u>	
(Title of person signing)	