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Account Number : 076077001654 Phone

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S. TALLENT DEC 0 1 2017

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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COR AMND/RESTATE/CORRECT OR O/D RESIGN AMEROPA NORTH AMERICA, INC.

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November 30, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AMEROPA NORTH AMERICA, INC. 2502 N ROCKY POINT DR SUITE 580 TAMPA, FL 33607

SUBJECT: AMEROPA NORTH AMERICA, INC.

REF: P03000154064

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Susan Tallent Regulatory Specialist II FAX Aud. #: 817000312190 Letter Number: 317A00024124

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BEFARE PROPERTIES

P.O BOX 6327 - Tallahassee, Florida 32314

(((H170003121903)))

Articles of Amendment to Articles of Incorporation of

Ameropa North America, Inc.			
(Name of	Corporation as currently filed w	ith the Florida Dept. of State)	
P03000154064			
	(Document Number of Corpor	ation (if known)	
Pursuant to the provisions of section 607.1 lts Articles of Incorporation:	006, Florida Statutes, this <i>Florida</i>	Profit Corporation adopts the following amendment	nt(3) to
A. If amending name, enter the new nar	ne of the corporation:		
		The new	
	tion "Corp," "Inc," or "Co". A	mpany," or "Incorporated" or the abbreviation professional corporation name must contain the	
B. Enter new principal office address, if	applicable:		
(Principal office address MUST BE A ST	KEET ADDRESS)		
		200	777
		3.50 O	يسمد. ا المسلم
C. Enter now mailing address, if applic (Mailing address MAY BE A POST O		二	(141 (3)
		<u> </u>	, –
			2
•	<u></u>		
D. If amending the registered agent and new registered agent and/or the new		orlds, enter the name of the	
Name of New Revistered Avent	William M. Stainton		
\	20117 7 11 0		
	201 N. Franklin Street, Suite 2000		
-	(Florida street addre	13)	
-		ss) Florida 33602	

11/30/2017 12:27 (FAX)8132734396 P.004/006

(((If amonting the Officer and/or Directors, enter the title and name of each officer/director being removed and title, name, and and each officer director being 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:

	hange	PT.	John Doe	
<u>X</u> R	emove	Y	Mike Jones	•
_X A	Add	<u>sv</u>	Sally Smith	
Type (Chec	of Action ck One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) _	Change		-	
_	Add			Baylety Community Communit
_	Remove			
2)	Change			
_	A dd			
_	Remove			
3)_	Change			
	Add			<u> </u>
_	Remove			
4) _	Change			
_	Add			
_	Remove			
	Change		_	
_	Add			
	Remove			
മ	Change			
	Add			
	Remove			

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,	dding additional Ar I sheets, if necessary).	(Ba specific)				
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If an amendmen	t provides for an exc	hange, reclassific	ention, or enneells	tion of issued shar	<u> 77.</u>	
(if not appli	mplementing the am cable, indicate N/A)	endment If not co	ontained in the an	nendment Itself:		
	•					
			. <u>-</u>			

.

The date of each amendment(s) ad	doption:	, if other than the
late this document was signed.	•	
Meetive date if applicable:		
	(no more than 90 days after amendment file date)	
lote: If the date inserted in this be ocument's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su:	pted by the shareholders. The number of votes cast for the amend flicient for approval.	ment(s)
	roved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s)	
"The number of votes cast i	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
1		
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shar	ehold er
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and sharehold	der
Dated //	30/2017	
Signature	Richard Somp e	
selected	rector, president or other officer—if directors or officers have not l, by an incorporator—if in the hands of a receiver, trustee, or othe ed fiduciary by that fiduciary)	
_	Richard Source/ (Typed-or printed name of person signing)	
	(Typed or printed name of person signing)	
	C 50	
	(Title of person signing)	