

P041000054927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

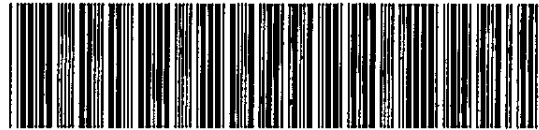
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Amend

06/04/04--01022--002 **42.75

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04 JUN -4 PM 2:21
STONINGHAM STATE
TALLAHASSEE, FLORIDA

AJR
6/14/04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ADDING OFFICERS

DOCUMENT NUMBER: PC4000054927

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SUSAN L O'CONNOR

(Name of Person)

OCON U.S.A. INC

(Name of Firm/ Company)

3017 FOLKLORE DRIVE

(Address)

VALRICO, FLORIDA 33594

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

MARI O'Conner

(Name of Person)

at (516) 798-9298

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

OCON U.S.A. INC.

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

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04 JUN -4 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P04000054927

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

ADDED: MARIJANE O'CONNOR - Chief Financial Officer

1 GRANADA PLACE

MASSAPEQUA, NY 11758

ADDED: EDWIN O'CONNOR - Vice President

39 JOLUDOW RD

MASSAPEQUA PARK, NY

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) adoption: 5.20.04

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were approved 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):*

"The number of votes cast for the amendment(s) was/were sufficient for approval 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.

* Signed this 27th day of May, 2004.

* Signature Susan L. O'Connor
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

SUSAN L. O'CONNOR
(Typed or printed name of person signing)

PRESIDENT / CEO
(Title of person signing)

FILING FEE: \$35