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SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TTQ Ocean	n 3905 Corp.		
DOCUMENT NUM	_{BER:} p0600000140	7		
	of Amendment and fee are su			
Please return all corre	spondence concerning this ma	tter to the following:		
	Mimi Bared			
		Name of Contact Person	1	
	Bared and Assoc	iates, PA		
		Firm/ Company	· · · · · ·	
	2950 SW 27th Av	venue, Suite 100)	
		Address		
	Miami, FL. 33133			
		City/ State and Zip Code	e	
miı	mi@baredlaw.com	1		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information concerning this matter, please call:				
Mimi Bared		at (305	, 6666010 x 851	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	urtment 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)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301	

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the F)	orida Dept. of State)	
P0600001407		
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
Milimex USA Corp.		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co" or the designation "Corp," "Inc." or "Coword "chartered," "professional association," or the abbreviation")	Co". A professional corporation name must c	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stre	vet address)	MAR
New Registered Office Address:	, Florida	
(City)	(Zip Code)	THIN S-
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		1
Signature of New Registered A	vent 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 <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: X Change	PT	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add Remove				
2) Change				
Add				
Remove				
Change . Add		····		
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Remove				
6) Change				
Add		_		
Remove				

	(Be specific)
P. T MARK PERMITS	
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	TO COMPANIE TO COM
n amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
ovisions for implementing the amer	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
n amendment provides for an exchovisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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ovisions for implementing the amer	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
ovisions for implementing the amer	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(by the shareholders was/were sufficient for approval.	s)
The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
hy	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_ 2/28/2019/	
Signature	
(By a director, preside flor other officer – if directors or officers have not been selected, by an incorporate – if in the hands of a receiver, trustee, or other cou appointed fiduciary by that viduciary)	rt
Estariislao Martinez Martinez	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<u> </u>