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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Scoofer WORKS DOCUMENT NUMBER: PO600	OSA INC ame of Corporation)	
The enclosed Articles of Correction and fe	-	
Please return all correspondence concernin	g this matter to the following:	
Peter WARRICK (Name of Contact Person)		
Scooler Works US (Firm/Company)	a Tuc	
4360 Peless Ro		
For Luderdale, (City/State and Zip Code)	Fl 33317	
For further information concerning this matter, please call:		
Pater WAZEICK (Name of Contact Person)	at (954) 931-4556 (Area Code & Daytime Telephone Number)	
	, , , , , , , , , , , , , , , , , , , ,	
Enclosed is a check for the following amou	ant:	
☐ \$35.00 Filing Fee	\$43.75 Filing Fee & Certificate of Status	
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy	
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	

_FILEU SECRETARY OF STATE DIVISION OF CORPORATIONS

Articles of Amendment

to

2007 FEB 15 AM 11: 30

Articles of Incorporation

Scooler Warks USA Tuc
(Name of corporation as currently filed with the Florida Dept. of State)

PO6000104954

(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):	
Scooter Super Store of A (Must contain the word "corporation," "company," or "incorporated"	LMERICA CORP
(Must contain the word "corporation," "company," or "incorporated"	or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "profe	essional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME	CHANCE) Indicate Article Number(s)
and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
-1	·
None	<u>. </u>
	······································
	÷ .
(Attach additional pages if	necessary)
If an amendment provides for exchange, reclassification, of	
for implementing the amendment if not contained in the a	mendment itself: (if not applicable, indicate N/A)
4	
11/4-	
N/K	

(continued)

The date of each amendment(s) adoption: 290 Effective date if applicable: 2907 (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. Margaret L Flake MY COMMISSION # DD201346 EXPIRES April 8, 2007 BONDED THRU TROY FAIN INSURANCE INC (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) HARRICAL (Typed or printed name of person signing)

FILING FEE: \$35