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| PICK-UP                 | ☐ WAIT            | MAIL      |
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| Certified Copies        | _ Certificates    | of Status |
| Special Instructions to | Filing Officer:   |           |
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: ATLANTIC IN   | TER IMP. EXP. CORP                        |  |
|--|---|--|
| DOCUMENT NUMBER: P06000116104  |   |  |
| The enclosed Articles of Amendment and fee are   | submitted for filing.                     |  |
| Please return all correspondence concerning this r   | matter to the following:                  |  |
| AURIO D HO   |   |  |
|  | Name of Contact Persor                    |  |
| <del></del>  | Firm/ Company                             |  |
| ** * **300 BAYVIEW DRIVE, A  | APT 814                                   |  |
|  | Address                                   |  |
| SUNNY ISLES BEACH,   | FL, 33160                                 |  |
|  | City/ State and Zip Code                  |  |
|  |   |  |
| E mail address: (to bu   | used for future annual report             | notification)  |
| E-man address. (10 be  | s used for future annual report           | notification)  |
| For further information concerning this matter, pl   | ease call:                                |  |
| AURIO D HO   | at (                                      | 613-1561   |
| Name of Contact Person   | at ( Area Code & Daytime Telephone Number |  |
| Enclosed is a check for the following amount made  | de payable to the Florida Depa            | artment of State:  |
| \$35 Filing Fee  |   | ☐\$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 | Amend<br>Divisio<br>Clifton               | Address Iment Section on of Corporations Building xecutive Center Circle               |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

FILED 17 NOV 13 PM 4: 10

ATLANTIC INTER IMP. EXP. CORP. (Name of Corporation as currently filed with the Florida Dept. of State) P06000116104 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." **1292 SW 21 TERRACE** B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) MIAMI,FL,33145 C. Enter new mailing address, if applicable: **1292 SW 21 TERRACE** (Mailing address MAY BE A POST OFFICE BOX) MIAMI,FL,33145 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: OCTAVIO P ARAUJO Name of New Registered Agent **1292 SW 21 TERRACE** (Florida street address) Florida 33145 (Zip Code) MIAMI New Registered Office Address: (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Octovio P. Accuso

Signature of New Registered Agent, 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 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 us Remove, and Sally Smith, SV as an Add.

| X Change                   | <u>PT</u>    | John Doe         |                                       |
|----------------------------|--------------|------------------|---------------------------------------|
| X Remove                   | <u>v</u>     | Mike Jones       | :<br>:                                |
| X Add                      | <u>sv</u>    | Sally Smith      |                                       |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u>      | <u>Addres</u> s                       |
| 1) Change                  | P            | HO, AURIO D      | 1000 FIFTH STREET                     |
| Add                        |              |                  | SUITE 200-L5                          |
| X Remove                   |              |                  | MIAMI BEACH,FL,33139                  |
| 2) Change                  | P            | OCTAVIO P ARAUJO | 1292 SW 21 TERRACE                    |
| X Add                      |              |                  | MIAMI,FL,33145                        |
| Remove                     |              |                  |                                       |
| 3 ) Change                 |              | <del></del>      | <del></del>                           |
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| 5) Change                  |              |                  |                                       |
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| Remove                     |              |                  |                                       |
| 6) Change                  |              |                  | •                                     |
| Add                        |              |                  |                                       |
| Remove                     |              |                  |                                       |

| Attach additional she                      | ng additional Art<br>rets, if necessary).    | (Be specific)                             |                  |                    |                  |             |
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| f an amendment pro<br>provisions for imple | <u>DVIGES for an exc</u><br>ementing the amo | <u>nange, reclassif</u><br>endment if not | ication, or canc | ellation of issued | <u>1 shares,</u> |             |
| (if not applicable                         | e, indicate N/A)                             | ancir ii iiot                             | London III tile  |                    |                  |             |
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|   | 1.1/06/2017   |                               |
|---|---|-------------------------------|
| The date of each amendment(s)                                       | adoption:   | , if other than the           |
| date this document was signed.                                      | 10 ( 10 0 1 7   |                               |
| Effective date <u>if applicable</u> :                               | /06/2017  |                               |
| <u>,,,</u>  | (no more than 90 days after amendment file date)  |                               |
| Note: If the date inserted in this document's effective date on the | block does not meet the applicable statutory filing requirements, this department of State's records.   | ate will not be listed as the |
| Adoption of Amendment(s)  | (CHECK ONE)   |                               |
| ■ The amendment(s) was/were a by the shareholders was/were          | dopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.   | s)                            |
|   | pproved by the shareholders through voting groups. The following statem or each voting group entitled to vote separately on the amendment(s):   | ent                           |
| "The number of votes ca   | st for the amendment(s) was/were sufficient for approval  |                               |
| by  | <u>_</u>  |                               |
| · -   | (voting group)  |                               |
| ☐ The amendment(s) was/were a action was not required.              | dopted by the board of directors without shareholder action and sharehold   | er                            |
| The amendment(s) was/were a action was not required.                | dopted by the incorporators without shareholder action and shareholder  |                               |
| 11/06/20<br>Dated   | 17 Janful   |                               |
| Signature   |   |                               |
| (By a selec   | director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary) | rt                            |
|   | HO, AURIO D   |                               |
|   | (Typed or printed name of person signing)   |                               |
|   | PRESIDENT   |                               |
|   | (Title of person signing)   |                               |