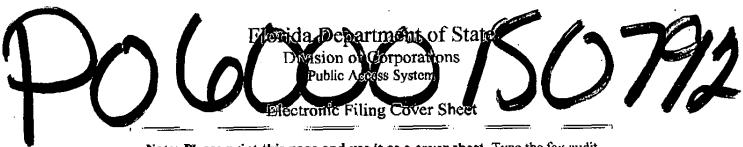
FROM : LAZARUS

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Oct. 16 2008 12:01PM P1 https://clifc.sunbiz.org/scripts/efilcovr.exe



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To:

Division of Corporations

: (850)617-6380 Fax Number

Franci

: LAZARUS CORPORATE FILING SERVICE, INC Account Name Account Number : 12000000019

: (305)552-5973 Phone

(305) 220-1440 Fax Number

COR AMND/RESTATE/CORRECT OR O/D RESIGN

ELETROLANDIA USA CORPORATION

Certificate of Status 0 Certified Copy Page Count 03 Estimated Charge

Electronic Filing Menu

Corporate Filing Menu

Help

10/16/2008 11:50 AM

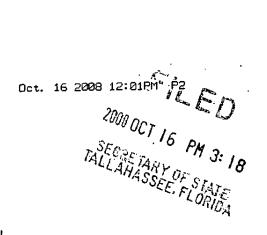
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H08000237310

Articles of Amendment to Articles of Incorporation of

ETROLANDIA USA CORPORATION



| | intly fled with the Florida Dept. of S | <u>gate</u>) |
|---|---|----------------------------|
| | 000150792 ther of Corporation (if known) | |
| Pursuant to the provisions of section 607.100 following amendment(s) to its Articles of Incomp | | it Corporation adopts the |
| A. <u>If amending name, enter the new name of</u> | the corporation: | |
| LA COLONIAL INSURANCE SERVICE | | ····· |
| The new name must be distinguishable at "incorporated" or the abbreviation "Carp.," "Ca". A professional corporation name association," or the abbreviation "P.A." | "Inc.," or Co.," or the designation | "Corp," "Inc," or |
| B. <u>Enter new principal office address if app</u> (Principal office address <u>MUST BE A STREE</u>) | | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) | | |
| If amending the registered agent and/or registered agent and/or the new regis | | nter the name of the |
| Name of New Registered Agent: | | |
| | | |
| New Registered Office Address: | (Florida street address) | |
| _ | | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing hereby accept the appointment as registered position. | a Resistered Agent: agent. I am familiar with and acc | upt the obligations of the |
| | | _ |
| Si | gnature of New Registered Agent, if ch | anging |
| | Page 1 of 3 | |

H08000237310

FROM : LAZARUS

H08000237310

| Ţţ | ne date of each amendment(s) ac | toption; <u>09/30/2008</u> |
|----|---|---|
| Ef | Tective dute if applicable: | |
| | (no: | more than 90 days after amendment file date) |
| A¢ | ioption of Amendment(s) | (CHECK ONE) |
| q | The amendment(s) was/were add by the shareholders was/were sur | opted by the shareholders. The number of votes east for the amendment(sfficient for approval. |
| u | | woved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s): |
| | "The number of votes cast for | or the amendment(s) was/were sufficient for approval |
| | by | |
| | (voti) | ng group) |
| | The amendment(s) was/were ado action was not required. | pted by the board of directors without shareholder action and charcholder |
| () | The amendment(s) was/were add action was not required. | opted by the incorporators without shareholder action and shareholder |
| | Dated_10/16/200 | |
| | Signature | Chamber Grand |
| | (By a dire selected, | ector, president of other officer. Indirector to officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court is fiduciary by that fiduciary. |
| | <u>-</u> | EZEQUIEL MOJICA |
| | | (Typod or printed name of person signing) |
| | <u> </u> | PRESIDENT |
| | _ | (Title of person signing) |

Page 3 of 3

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