2/17/2015 11:40:40 From: To: 8505176380

Division of Corporations



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000040648 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN MECTRON USA, INC.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

FEB 1 8 2015

2/17/2015 11:40:40 From: To: 8506176380

COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: MECTRON USA	, INC.	
DOCUMENT NUMBER: P07000098588		
The enclosed Articles of Amendment and fee are su	ibmitted for filing.	
Please return all correspondence concerning this ma	uter to the following:	
PAULO MIRANDA		
	Name of Contact Person)
PSM CORPORATE SERVI	CES INC.	
	Firm Company	
	Address	
MIAMI, FL 33131	_	
	City/ State and Zip Code	e
VALERIA ESPINOZA@PSMCO	RPORATE COM	
	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	
VALERIA ESPINOZA	305	456-3752
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	riment of State:
S35 Filing Fee Sertificate of Status	⊠\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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 Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle asses, FL 32301

و و در		15 F
	Articles of Amendment to	
Articles of In	•	888 -
MECTRON USA, INC.		704
(Name of Corporation as currently filed with the	Florida Dept, of State)	
P07000098588		
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the cornoration:		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association." or the abbreviation B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)	"Co". A professional corporation name "P.A." 2500 NW 79TH AVENUE SUITE 226	the abbreviation
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2500 NW 79TH AVENUE SUTTE 226	
	DORAL, FL 33122	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent		-
(Florida si	reci address)	
New Registered Office Address: (City,	, Florida	de)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		ition.
Nignature 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 fullowing 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 nomed 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.

X Change	<u>PT</u>	John Do	z.	
X Remove	¥	Mike Jo	<u>043</u>	
_X Add	<u>27</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	Title		Name	Adulress
1)Change		-		
Add				
Remove				
2)Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change		_		
Add				
Remove				
_				
6)Change		_		
Add				
Remove				

	dditional sheets, if necessary). (Be specific)	
ASE C	HANGE THE PRINCIPLE AND MAILING ADDRESS TO:	
NW T	OTH AVENUE, SUITE 226 DORAL, FL 33122	
		
	······································	- -
	·	
		· ·
		
<u>fan ap</u>	endment provides for an exchange, reclustification, or cancellation of issued sl ons for implementing the amendment if not contained in the amendment liself:	Ares.
(1)	nu applicable, indicute N/A)	

The date of each amendment(s) as date this document was signed.	doption:	, if other than the
Effective date if applicable:		
ENERGY WALL OF HERPERSONS	(no more than 90 days after amendment file dute)	
Adoption of Amendment(s)	(CHECK ONE)	·
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated - Friend	add 1144 2015	
Signature College	in Compos Americal Olice	_
selecte selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	-
	Wagner Campos do Amaral Silva	
	(Typed or printed name of person signing)	
	РОЛ	
	(Title of person signing)	