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(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
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. (Do	cument Number)	
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JAN 05 2012

EXAMINER

COVER LETTER

TO:	Amendment Section Division of Corporations
SUB.	JECT: Ziemann USA, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: P09000041287
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
Ingo	viehweg-Klee
	(Name of Person)
Zier	mann USA, Inc.
	(Name of Firm/Company)
100	1 Brickell Bay Dr., Suite 1806
	(Address)
Mia	mi, FL 33131
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
Ingo	Viehweg-Klee at (786) 2753870 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	t Address: Indiment Section Indiment Section Indicate of Corporations In Building Executive Center Circle Inassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

Articles of Amendment to Articles of Incorporation of

Ziemann USA, Inc.			
(Name of Corporation as currently filed v	vith the Florida Dept.	of State)	
P09000041287			
(Document Number of Corp	poration (if known)		_
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this <i>Florida Profi</i>	t Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new name of the corpor	ation:		
			The new
name must be distinguishable and contain the word "c" ("Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	nc," or "Co". A profe	y," or "incorporated" or the essional corporation name mus	abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	<u></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 of new registered agent and/or the new registered office		a, enter the name of the	VISCON 12 JAN
Name of New Registered Agent			ON OF CORPO
6	Florida street address)		•
New Registered Office Address:		, Florida	— 5
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		ot the obligations of the position	<i>1</i> .
Signature of New Re	gistered Agent, if chang	ging	

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 as Remove, and Sally Smith, SV as an Add.

Example: XChange	<u>PT</u> <u>J</u>	ohn Doe	
X Remove	<u>v</u> <u>n</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add _X Remove	D	Marc Clauss	1001 Brickell Bay Dr. Suite 1806 Miami, FL 33131
2)Change Add _XRemove	D	Andreas Weinlein	1001 Brickell Bay Dr. Suite 1806 Miami, FL 33131
3) Change Add Remove	PD	Joachim Gunkel	1001 Brickel Bay Dr. Suite 1806 Miami, FL 33131
4) Change Add Remove	<u>P</u>	Thomas Lehmann	1001 Brickel Bay Dr. Suite 1806 Miami, FL 33131
5) Change X Add Remove	<u>D</u>	Joern Trierweiler	1001 Brickel Bay Dr. Suite 1806 Miami, FL 33131
6) Change Add Remove	<u>D</u>	Ulrich Dieter	1001 Brickel Bay Dr. Suite 1806 Miami, FL 33131

(attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Mineral II not contained in the amendment risen.
(if not applicable, indicate N/A)	Ament II not contained in the amendment tisen.
(if not applicable, indicate N/A)	Ament II not contained in the amendment tisen.
(if not applicable, indicate N/A)	Ament II not contained in the amendment tisen.
(if not applicable, indicate N/A)	Ament II not contained in the amendment tisen.
(if not applicable, indicate N/A)	Ament II not contained in the amendment tisen.

The date of each amendment(s) adoption: Dec 30, 20 (
Effective date if applicable: Dec 30, 2011 (no more than 90 days after amendment file date)
(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 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)
(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.
Dated Dec 30, 2011
Signature (By a director, president or other officer – if directors or officers have not been
(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)
INSO Viehuez-Klee
(Typed or printed name of person signing)
FUP-
(Title of person signing)