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DEC 23 2015

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NU CAMECA INC						
DOCUMENT NUMBER: P 1000082914						
The enclosed Articles of A	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspon	dence concerning this mat	tter to the following:				
John Weekes						
A	1 .	Name of Contact Person				
Pu (amp ce in Company						
P A P W A A						
Address						
-	Jasehuca	MO) 6335	1			
	Jones Jucy /	City/ State and Zip Code				
Nucemoea Camoni COM E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
John (Deeles	at (<u>561</u>	703 - 9332			
Name of C	ontact Person	Area Coo	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			

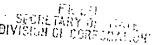
Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



to

Nucame con inc	15 DEC 21 PM 1:55
~	15 DEC 21 PH 1: 55 otly filed with the Florida Dept. of State)
POUCO 82914	
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	Sume as below
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	50/a de dagas suc H201
	Boynton Beach Fc 33426
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5 Via de Casas Sur
	#201
	Boyaton breach FL 33426
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida S	street address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia.	
, , , , , , , , , , , , , , , , , , , ,	
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 as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Remove			
3) Change			
Add			
Remove			
4) Change		, 	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Changed address from
0809 19 th ave 5
Labenosta Fc 33462 to
·
5 V/u de casus suc H201
Boynton Beach FL 33426
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	Stanow Thinks
Effective date if applicable:	DIVISION OF CORP STATE
(no more than 90 days after amendment file date)	15 DEC 21 PM 1: 55
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
If the amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by President "	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sh action was not required.	areholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
Dated12\15\15	
Signature President	
(By a director, president or other officer – if directors or officers have n selected, by an incorporator – if in the hands of a receiver, trustee, or other officers.	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
\cdot	
Rosidant	

(Title of person signing)