

P11000053883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

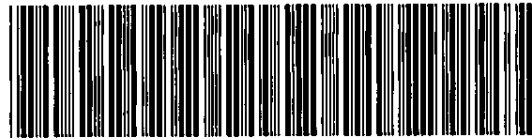
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/19/11--01004--009 **35.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED
11 OCT 19 AM 10:30

FILED
11 OCT 19 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
C.COULLIETTE

OCT 19 2011

EXAMINER

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. PROMOLIGHT INTERNATIONAL CORPORATION
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☒ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

Articles of Amendment
to
Articles of Incorporation
of

PROMOLIGHT INTERNATIONAL CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000053883

(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:

The new 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."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

CREXENT BUSINESS CENTER

12555 ORANGE DRIVE, STE 4506

DAVIE, FL. 33330

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

CREXENT BUSINESS CENTER

12555 ORANGE DRIVE, STE 4506

DAVIE, FL. 33330

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:

Name of New Registered Agent:

EVALDO B. DO AMARAL

12555 ORANGE DRIVE, STE 4506

New Registered Office Address:

(Florida street address)

DAVIE

(City)

Florida 33330

(Zip Code)

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.

Signature of New Registered Agent, if changing

EVALDO B. DO AMARAL

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PR/TR	EVALDO B. DO AMARAL	11869 SW 43RD COURT Davie, FL 33330 45% SHARES	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
SEC	LUCIA M. G. DO AMARAL	11869 SW 43RD COURT DAVIE, FL 33330 20% SHARES	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VP	Overseas Exp. Mgmt. S.A.	20900 NE 30th AVENUE, # 800 AVENTURA, FL 33180 35% SHARES (FEI#98-0440828)	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

VP: EVA LAMAS-20900 NE 30TH AVENUE, STE 800, AVENTURA, FL. 33180.

VP: GUIHERME J.A. OLIVEIRA-ESTRADA DE ALDEIA, KM14, NO 2143 ALDEIA

CAMARAGIBLE, PE BRASIL 54783-010

VP: SONIA REGINA S. FERNANDES-AV.PROF.MARIA SALES, NO.480, APT 102

TAMBAU. JOAO PESSOA, PM BRASIL 58039-130.

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: 10/12/2011

(date of adoption is required)

Effective date if applicable:

(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)

☐ 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 X October 12, 2011

Signature X

(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)

EVALDO B. DO AMARAL

X EVALDO B. DO AMARAL

(Typed or printed name of person signing)

X PRESIDENT

(Title of person signing)