To:

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COR AMND/RESTATE/CORRECT OR O/D RESIGN NACAR MOTORCYCLE USA INC

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TO: Amendment Section

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COVER LETTER

Division of Corporations NAÇAR MOTORCYCLE USA INC NAME OF CORPORATION: P12000002286 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SAVANA MYLLYS SILVA Name of Contact Person ACCOUNT BOOKKEEPING CORP Firm/ Company 3300 S HIAWASSEE RD STE 106 Address ORLANDO, FL 32835 City/ State and Zip Code INFO@ABKCORP.COM fi-mail address: (to be used for future annual report nobification). For further information concerning this matter, please call: 407 898-1757
Area Code & Daytime Telephone Number SAVANA MYLLYS SILVA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee S35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

Tallahassee, FL 32314

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2661 Executive Center Circle Tallahassoc, F1, 32301

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Articles of Amendment to Articles of Incorporation of

	NACAR MOTORCYCLE USA INC
(Name of Corpor	ation as corrently filed with the World's Dept. of State)
	P12000002286
(Doc	cument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:
	The new
name must be distinguishable and contain the various properties of the designation "Coword "chartered," "professional association," or the	vord "corporation," "company," or "incorporated" or the abbreviation orp," "Inc," or "Co". A professional corporation name must contain the the abbreviation "P.A."
B. Enter new principal office address; if applica (Principal office address MUST BE A STREET A	
(Principal office agaress MUST BE A STREET 3	QDRESS)
	: 0
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)
•	
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	5
D. If amending the registered agent and/or regis	stered office address in Florida, enter the name of the
new registered agent and/or the new register	
Name of New Registered Agent	VIANNA, RICARDO
	5632 INTERNATIONAL DRIVE
· · · ·	(Florida street address)
Sew Registered Critice Address:	ORLANDO 32819 Florida
	(City) (Zip Code)
New Registered Agent's Signuture, if clianging I	Registered Agents
I hereby accept the appointment as registered agen	it. I im forther with induccept the obligations of the position.
	South Of New Registered Agent, if changing

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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 us Remove, and Sally Smith, SV as an Add Example:

X Change	PT	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1)Change	P	MORELLI, MAURO LUIS	5632 INTERNATIONAL DRIVE
Actd X Remove			QRLANDO, FL 32819
2) Change	Р	VIANNA, RICARDO	5632 INTERNATIONAL DRIVE
X Add			ORLANDO, FL 32819
Remove 3)Change	VP	MAURICIO MARTINS, RENATO	5632 INTERNATIONAL DRIVE
X Add			ORLANDO, FL 32819
4) Change	VP	MARTINS JUNIOR, CARLOS ALBERTO	5632 INTERNATIONAL DRIVE
X Add			ORLANDO, I'L 32819
5) Change	water of the state	and the second s	
Add			
6) Change			
Remove			
Remove			

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 If intending or adding additional Art (Attach additional sheets, if necessary). 	(Be specific)	
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F. If an innendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification, or cancel endment if not contained in the a	hation: of issued shares, mendment itself:
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The date of each amendment(s) adoption: 30/201 ; if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 vate separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
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 SEPTEMBER 30, 2015 Signature
(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)
MAURO LUIS MORELLI
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

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