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C. LEWIS

AUG 1 5 2013

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LUAU USA CORP DOCUMENT NUMBER: P12000033245 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CAMILA ANDRADE Name of Contact Person LUAU USA CORP Firm/ Company 5401 S KIRKMAN RD STE 310 ORLANDO, FL 32819 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ALBERTO LEMUS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

H13000 18 15963

Division of Corporations

Tallahossee, FL 32301

2661 Executive Center Circle

Clifton Building

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Articles of Amendment Articles of Incorporation 13 AUG 15 PM 2: 30

SECRETARY OF STATE TALLAHASSEE, FLORIDA

LUAU USA CORP

(Name of Corporation as currently filed with the Florida Dept. of State) P12000033245

(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

word "corporation," "compai orp," "Inc," or "Co". A pro the abbreviation "P.A."	ny," or "incorpor fessional corporat	ated" or the abi	The new previation putain the
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(Florida street address)	· · · · · · · · · · · · · · · · · · ·	****	*****
	ble: DDRESS) BOX) stered office address in Florie ed office address:	ble: DDRESS) BOX) stered office address in Florida, enter the name ad office address:	word "corporation," "company," or "incorporated" or the abborp," "Inc," or "Co". A professional corporation name must cothe abbreviation "P.A." ble: DDRESS) BOX) stered office address in Florida, enter the name of the ed office address:

Page 1 of 4.

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

Example: <u>X</u> Change	PT	John Doe	orenses out of the second
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	Р	CESAR AUGUSTO N SILVEIRA	R MINAS GERAIS 495
X Add.		s	SALVADOR, BA 41830-020 BRAZIL
Remove	• • •		
2) Change	VP	CAIO N SILVEIRA	R MINAS GERAIS 495
X Add			SALVADOR, BA 41830-020 BRAZIL
Remove	*	,	· · · · · · · · · · · · · · · · · · ·
3) X Change	T	ELIZABETH R SILVEIRA	R MINAS GERAIS 495
Add		5	SALVADOR, BA 41830-020 BRAZIL
Remove		en e	
4) X Change	S	CAMILA B ANDRADE	R MINAS GERAIS 495
Add	•••		SALVADOR, BA 41830-020 BRAZIL
Remove		- - -	
5) Change			
Add			
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(Chamas			
() Change		and the second of the second	
Add		Service Servic	Yes a second
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E. If amending or adding addi	itional Articles, enter change	e(s) here:	.•	``	****
(Attach additional sheets, if n	ecessary). (Be specific)	· · · · · · · · · · · · · · · · · · ·	Sec. 2.	Se	
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F. If an amount—out—would as	for an arraba arrab	Al 18-41-			
F. If an amendment provides provisions for implementing	ng the amendment if not con	tained in the amen	dment itself:		
(if not applicable, indic	cate N/A)				
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	The date of each amendment	08/14/2013	13 AUG	15 PM 2: 30
	date this document was signed. Effective date if applicable:	08/14/2013	TALLAHAS	SEE, FLORID
	The second secon	(no more than 90 days after amen	dment file date)	
	Adoption of Amendment(s)	(CHECK ONE)	S. Maria	
	☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes re-sufficient for approval.	cast for the amendment(s)	
	☐ The amendment(s) was/wer must be separately provide	e approved by the shareholders through voting group d for each voting group entitled to vote separately or	s. The following statement n the amendment(s):	
	"The number of votes	cast for the amendment(s) was/were sufficient for ap	pproval	
	by	(voting group)	."	
	action was not required. The amendment(s) was/wes	e adopted by the board of directors without sharehold e adopted by the incorporators without shareholder a		
	action was not required. Dated Signature	1/14/2013 While		
	(E	ly a director, president or other officer – if directors of elected, by an incorporator – if in the hands of a recei- opointed fiduciary by that fiduciary)	or officers have not been iver, trustee, or other court	-
		CAMILA B AND	DRADE	
		(Typed or printed name of pe		
		SECRETA	ARY	<u></u>
		(Title of person signi	ing)	te a service of the service