P12000079244

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AND
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14 HAY 22 PH 2: 34
SECRETARY SECRETAR

C. LEWIS
JUN 5 2014
EXAMPLER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	MEL GLOBA	AL CORP			
DOCUMENT NUMBER:	P12000079244				
The enclosed Articles of Amendm	ent and fee are sub	omitted for filing.			
Please return all correspondence co	oncerning this mat	ter to the followin	ng:		
	MIG	GUEL E LARA	BERO	VIDE	ES .
	Name of Contact Person MEL GLOBAL CORP				
	Firm/ Con ON BAY DRI		STA	PT 1206	
	Address WEST PALM BEACH, FL 33406				106
	City/ State and Zip Code				
		XSMART@G			
E-mail	address: (to be use	ed for future annu	ial report	notific	ation)
For further information concerning	g this matter, please	e call:			
MIGUEL E LARA BER	OVIDES	at (786	1	704-2604
Name of Contact P	erson	ai (Area Coo	/ de & D	aytime Telephone Number
Enclosed is a check for the follow	ng amount made p	ayable to the Flor	rida Depa	rtment	of State:
-	75 Filing Fee & ficate of Status	□\$43.75 Filing Certified Cop (Additional co enclosed)	у	Ce Ce (A	2.50 Filing Fee entificate of Status entified Copy dditional Copy enclosed)
Mailing Address Amendment Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations		Clifton	ment S n of C Buildi	Section orporations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of MEL GLOBAL CORP



14 MAY 22 PM 2: 34

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(Document Num	ber of Corporation (if kno	own)		-
rsuant to the provisions of section 607.1006, I Articles of Incorporation:	Florida Statutes, this <i>Flor</i>	ida Profit Corporation ado	pts the following	g amendment(s
If amending name, enter the new name of KAF	the corporation: PYDERM USA INC			Th
me must be distinguishable and contain the forp.," "Inc" or Co.," or the designation or chartered," "professional association." or Enter new principal office address, if apple	'Corp," "Inc," or "Co" or the abhreviation "P.A. icable:	. A professional corporati		
rincipal office address <u>MUST BE A STREET</u>	(<u>ADDRESS</u>) -			-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		N/A		-
If amending the registered agent and/or renew registered agent and/or the new regis	tered office address:	in Florida, enter the name	of the	-
Name of New Registered Agent	N/A N/A	***************************************		
	(Florida street a	ddress)		
New Registered Office Address:	N/A (Citv)	, Florida	N/A (Zip Code)	_
	(Cuy)		(Zip Code)	
ew Registered Agent's Signature, if changin ereby accept the appointment as registered ag		and accept the obligations	of the position.	
C:	e of New Registered Ager	• if abayaina		

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

If amending or adding additional Artic (Attach additional sheets, if necessary). N/A	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A) N/A	nament i not contained in the amendment agen.
· · · · · · · · · · · · · · · · · · ·	

05/19/2014 The date of each amendment(s) adoption: _ __, if other than the 14 MAY 22 PH 2: 34 date this document was signed. 05/19/2014 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 (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. 05/19/2014 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) MIGUEL E. LARA BEROVIDES (Typed or printed name of person signing)

PRESIDENT

(Title of person signing)