P13000008462



# Florida Department of State
## Division of Corporations
## Electronic Filing Cover Sheet

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To:

Division of Corporations # 8778620
Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN**

**VISION SYSTEMS NORTH AMERICA, INC.**

| | |
|---|---|
| Certificate of Status | 0 |
| Certified Copy | 1 |
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**COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Vision Systems North America, Inc.

DOCUMENT NUMBER: P13000008462

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lauren J. Licata, CLA/FRP
Name of Contact Person

Gray Robinson, P. A.
Firm/ Company

1221 Brickell Avenue - Suite 1600
Address

Miami, FL 33131
City/ State and Zip Code

crobin@visionsystems.fr
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lauren J. Licata, CLA/FRP at (305) 913-0386
Name of Contact Person — Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- ☐ $35 Filing Fee
- ☐ $43.75 Filing Fee & Certificate of Status
- ☒ $43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- ☐ $52.50 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

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FILED
13 MAY 23 PM 12:01 H13000115832 3
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Articles of Amendment**
**to**
**Articles of Incorporation**
**of**

Vision Systems North America, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

P13000008462
(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:
N/A
*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)*
1801 Penn Street
Suite 3
Melbourne, FL 31901

C. Enter new mailing address, if applicable:
*(Mailing address MAY BE A POST OFFICE BOX)*
1601 Penn Street
Suite 3
Melbourne, FL 31901

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* N/A

N/A
*(Florida street address)*

*New Registered Office Address:* ______________ (City), Florida ______ (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*



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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:**

| | | |
|---|---|---|
| X Change | PT | John Doe |
| X Remove | V | Mike Jones |
| X Add | SV | Sally Smith |

| Type of Action (Check One) | Title | Name | Address |
|---|---|---|---|
| 1) ___ Change | EVP | Cyrille Laitier | 1801 Penn Street |
| X Add | | | Suite 3 |
| ___ Remove | | | Melbourne, FL 31901 |
| 2) ___ Change | COO | Cyrille Laitier | 1801 Penn Street |
| X Add | | | Suite 3 |
| ___ Remove | | | Melbourne, FL 31901 |
| 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)*

N/A

**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)*

N/A

The date of each amendment(s) adoption: May 15, 2013

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 May 15, 2013

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)

Carl Putman

(Typed or printed name of person signing)

Director

(Title of person signing)