P130000 62885

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TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION: ELLECE USA INC	· ·	
	MBER: P13000062885		
	les of Amendment and fee are sul	bmitted for filing.	
Please return all co	rrespondence concerning this mat	ter to the following:	
	RICARDO YUKI		
		Name of Contact Person	n
	ELLECE USA INC.		
		Firm/ Company	
	1705 NW 133RD AVENUE,	SUITE 101	
		Address	
	MIAMI, FLORIDA 33182		
		City/ State and Zip Cod	е
nic	ardoyu@bauduccofoods.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further informa	ttion concerning this matter, pleas	e call:	
RICARDO YUKI		at (4779270
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a checl	for the following amount made p	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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

Articles of Amendment to Articles of Incorporation of

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ELLECE USA INC.	
(Name of Corporation as currently	y filed with the Florida Dept. of State)
P13000062885	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this aits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13
(Mulling dualess MAT BE A TOST OFFICE BOX)	
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address	<u>.</u>
Name of New Registered Agent	
(Florida str	eet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
Thereby 2000pt the appointment as regionered agent. Turnjumular	m and accept the oonganous of the position.
Signature of New R	egistered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chie 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 i. 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>	<u>Addres</u> s
1) Change	DT	D'OLIVEIRA, DJALMA A	1705 NW 133RD AVENUE
Add			SUITE 101
X Remove			MIAMI, FL 33182
2) X Change	AS	LOPEZ, MAGDALENA A	1705 NW 133RD AVENUE
Add			SUITE 101
Remove			MIAMI, FL 33182
3) Change	S	RICARDO YUKI	1705 NW 133RD AVENUE
X Add			SUITE 101
Remove			MIAMI, FL 33182
4) Change		_	
Add			
Remove			
5) Change	T	TAVARES DIB, LEONARDO	1705 NW 133RD AVENUE
X Add			SUITE 101
Remove			MIAMI, FL 33182
6) Change			
Add			
Remove			

	eets, if necessary). ((Be specific)			
_					
				 	
					
			_		
			<u> </u>	<u> </u>	
	·				
			<u> </u>		
					
					
<u>f an amendment p</u> e	rovides for an exchan	ige, reclassificatio	n, or cancellation	of issued shares,	
and the second s	lementing the amend	ment if not conta	ined in the amend	ment itself:	
provisions for imp					
provisions for imp (if not applicab	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
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•	5TH DAY OF JULY, 2019	
The date of each amendment(s) ad	option:	, if other than t
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast ficient for approval.	for the amendment(s)
	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the	
"The number of votes cast	or the amendment(s) was/were sufficient for approv	val .
by		_ :"
	(voting group)	
The amendment(s) was/were ado action was not required.	oted by the board of directors without shareholder ac	ction and shareholder
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators without shareholder action	and shareholder
Dated	17-2019	
Signature		
selected	rector, president or other officer – if directors or off, by an incorporator – if in the hands of a receiver, the factoriary by that fiduciary)	icers have not been crustee, or other court
	BTEFANO L. MOZZI	
	(Typed or printed name of person signing	g)
	PRESIDENT/DIRECTOR	
	(Title of person signing)	