P14000035285

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S. PRATHELY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: IZP TECHNOLOG	GIES AMERICA CORP				
DOCUMENT NUME	BER: P14000035285					
	of Amendment and fee are su	ubmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	ZULMA ELIANA RIVERO	s				
		Name of Contact Person	n			
	RIVEROS CORP					
•		Firm/ Company				
	1820 N CORPORATE LAKES BLVD, SUITE 202					
		Address				
	WESTON, FL 33326					
•		City/ State and Zip Cod	e			
CEO(@RIVEROSCORP.COM					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
ZULMA ELIANA RIVEROS		at (4395138			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)			
	ing Address	Street	Address			
	ndment Section	Amendment Section				
	sion of Corporations	Division of Corporations				
	Box 6327 hassee, FL 32314		Building Executive Center Circle			
1 4114	uidosee, I L 343 i 4	2001 €	ACCULIVE CERREL CITCLE			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

17P	TECHNOL	OGIES	AMERICA	CORP
125	LECTION	CUILO	AMENICA	CORE

(Name of Corporation as currently	filed with the Florida Dept. of State)	
P14000035285		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatticles</i> of Incorporation:	orida Profit Corporation adopts the following am	endment(s) to
A. If amending name, enter the new name of the corporation:		
ONE BELT ONE ROAD LATAM CORP	The	new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	" "company," or "incorporated" or the abbrevo". A professional corporation name must conto	viation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		(1) ASS (1) AS
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	TILED RY OF STA
Name of New Registered Agent	<u> </u>	TE
(Florida street	addraga	<i>'41</i>
·	,	
New Registered Office Address: (C	, Florida	
	ity) (Zip Code)	

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 <math>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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				,
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	
	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

	05/04/2017	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.	W0017	
U5/U4 Effective date <u>if applicable</u> :	1/2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	l not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopty the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	27	ت ت
- ,	(voting group)	- Vs
☐ The amendment(s) was/were adopaction was not required.	sted by the board of directors without shareholder action and shareholder	HAY -9
The amendment(s) was/were adopaction was not required.	sted by the incorporators without shareholder action and shareholder	Y OF STATE
05/04/2017 Dated		TATE PATIONS
Signature		
selected	by an incorporator – if in the hands of a receiver, trustee, or other court of fiduciary by that fiduciary	
	GAO YUAN	
-	(Typed or printed name of person signing)	
_		
	(Title of person signing)	