P14000038584

| (Re | equestor's Name) | | | |
|-------------------------|--------------------|-----------|--|--|
| (Ac | ldress) | | | |
| (Ac | ddress) | | | |
| (Ci | ty/State/Zip/Phone | #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | usiness Entity Nam | e) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to | Filing Officer: | | | |
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Office Use Only



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SECRETARY OF STATE JUVISION OF CORFORATION

SEP 1 0 2016

C LEWIS

COVER LETTER

TO: Amendment Section **Division of Corporations**

| NAME OF CORPOR | RATION: | ES USA INC | | |
|--|---|---|--|--|
| DOCUMENT NUMB | BER: P14000038584 | | | |
| The enclosed Articles | of Amendment and fee are su | abmitted for filing. | | |
| Please return all corres | pondence concerning this ma | tter to the following: | | |
| | VICTOR M. VERDI | | | |
| • | | Name of Contact Person | n | |
| | VERDI ASSOCIATES GRO | OUP, INC | | |
| | | Firm/ Company | | |
| | 312 E. VENICE AVENUE S | SUITE 203 | | |
| • | · | Address | | |
| | VENICE, FLORIDA 34285 | | | |
| - | | City/ State and Zip Cod | e | |
| viova | rdi@comcast.net | | | |
| VICVEI | - | sed for future annual report | notification) | |
| | D-man address. (to be u | sea for fatare amual report | notification) | |
| for further information | concerning this matter, plea | se call: | | |
| VICTOR M. VERDI | | at (| 829 8397 | |
| Name o | f Contact Person | Area Co | de & Daytime Telephone Number | |
| inclosed 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) | |
| 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

JJD ENTERPRISES USA INC

2016 AUG 25 AM 9: 24

| as currently filed with the Florida Dept. of State) | | | | |
|---|--|--|--|--|
| P14000038584 | | | | |
| nt Number of Corporation (if known) | | | | |
| Statutes, this Florida Profit Corporation adopts the following amendment(s) | | | | |
| poration: | | | | |
| The new | | | | |
| "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A." | | | | |
| NESS) | | | | |
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| | | | | |
| d office address in Florida, enter the name of the | | | | |
| ffice address: | | | | |
| | | | | |
| | | | | |
| (Florida street address) | | | | |
| , Florida | | | | |
| (City) (Zip Code) | | | | |
| | | | | |
| tered Agent: | | | | |
| am familiar with and accept the obligations of the position. | | | | |
| | | | | |
| | | | | |
| ure of New Registered Agent, if changing | | | | |
| | | | | |

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:

(Altach additional sheets, if necessary)

Remove

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.

| X Change | <u>PT</u> | John Do | <u>e</u> | | |
|-------------------------------|--------------|-------------|---------------|-------------|-------------------------|
| X Remove | <u>v</u> | Mike Jo | nes | | |
| X Add | <u>sv</u> | Sally Sn | nith | | |
| Type of Action (Check One) | <u>Title</u> | | Name | | Address |
| 1) X Change | TREAS | S | JOLEEN DIMINO | | 1807 FIELD ROAD |
| Add | | | | | SARASOTA, FLORIDA 34231 |
| Remove | | | | | |
| 2) Change | | | | | |
| Add | | | | | |
| Remove | | | | | |
| 3)Change | | | | | |
| Add | | | | | |
| Remove | | | | | |
| 4) Change | | | | | |
| Add | | | | | |
| Remove | | | | | |
| 5) Change | | | | | |
| Add | | | | | |
| Remove | | | | | |
| 6) Change | | | | | |
| Add | | | | | |
| | | | | | |

| Attach additional sheets, if necessary). | (Be specific) |
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| f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, and and an analysis |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and and an analysis |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and and an angellation of issued shares, and and an angellation of issued shares, and an an angellation of issued shares, and an angellat |
| provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |
| provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself: |

| The date of each amendment(s) adoption: | , if other than the |
|---|-------------------------|
| date this document was signed. | SECRETARY OF STATE |
| Effective date if applicable: | JIVISION OF CORPORATION |
| (no more than 90 days after amendment file date) | 2016 AUG 25 AM 9: 24 |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records. | |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval. | eent(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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 sharehaction was not required. | nolder |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. | er |
| Dated - 6/8/16 | |
| Signature Way Marsh | |
| (By a director, president or other officer - if directors or officers have not b selected, by an incorporator - if in the hands of a receiver, trustee, or other | |
| appointed fiduciary by that fiduciary) | |
| JAMES DIMINO | |
| (Typed or printed name of person signing) | |
| PRESIDENT | |
| (Title of person signing) | |