## P15000035869

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	·
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	isiness Entity Nai	me)
. (Do	ocument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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SEP 112 2016

C LEWIS



August 18, 2016

DISCHINO & SCHAMY PLLC 4770 BISCAYNE BLVD SUITE 1280 MIAMI, FL 33137 US

SUBJECT: SOCAPRI HOLDINGS USA, INC.

Ref. Number: P15000035869

We have received your document for SOCAPRI HOLDINGS USA, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis Regulatory Specialist II

Letter Number: 316A00017507



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	N: SOCAPRI HOLD	INGS USA, INC.	
	P15000035869		
The enclosed Articles of Am	endment and fee are su	bmitted for filing.	
Please return all corresponde	nce concerning this ma	tter to the following:	
CHRI	STOPHER A. DISCHI	NO	
		Name of Contact Perso	n
DISC	HINO & SCHAMY, PI	LLC	
		Firm/ Company	
<i>477</i> 0 i	BISCAYNE BLVD., S		
		Address	
2412		Address	
MIAN	II, FL 33137		
		City/ State and Zip Cod	e
CHRISTOP	HER@DSMIAMI.COI	M	
	-mail address: (to be us	sed for future annual report	notification)
		-	
For further information conce	erning this matter, pleas	se call:	
CURIOTORUER RICCURA		704	201.0210
CHRISTOPHER DISCHING		at (	
Name of Con	act Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	llowing amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee
	Certificate of Status	Certified Copy	Certificate of Status
		(Additional copy is enclosed)	Certified Copy (Additional Copy
		enclosed)	is enclosed)
Malling A	13	S4	4.3.3
Mailing A Amendmen		Street Address Amendment Section	
		Division of Corporations	
	Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building		
	FL 32314		Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

SECRETARY OF STATE JIVISION OF CORFORATION

2016 SEP -6 AM 9: 21

SOCAPRI HOLDINGS USA, INC.		<b>100 02</b> 0 0 0 0 0 0 0
(Name	of Corporation as current	ly filed with the Florida Dept. of State)
P15000035869		
	(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
		The new
	nation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable:		4770 BISCAYNE BLVD., SUITE 1280
(Principal office address MUST BE A S		MIAMI, FLORIDA 33137
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4770 BISCAYNE BLVD., SUITE 1280
		MIAMI, FLORIDA 33137
D. If amending the registered agent are new registered agent and/or the new		
Name of New Registered Agent	DISCHING & SCHAMY PLIC	
<u>Name of New Registered Agent</u>	4770 BISCAYNE BLVD	., SUITE 1280
	(Florida st	reet address)
New Registered Office Address:	MIAMI	, Florida 33137
		(City) (Zip Code)
New Registered Agent's Signature, if c	hanging Pagistarad Agant	
		is with and accept the obligations of the position.
	<i>/</i>	1 1 -
	/ (	

Signature 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:

(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>	<u>Addres</u> s
1) X Change	PVST	ALESSANDRO RICCHIUI	4770 BISCAYNE BLVD.
Add			SUITE 1280
Remove			MIAMI, FL 33137
2) Change		_	
Add			
Remove			
3) Change	-		
Add			
Remove			
4) Change		_	<del>-</del>
Add			
Remove			
5) Change		<del>-</del>	_
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(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, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	EURE FARY OF STATE SIVISION OF CORPORATE A
Effective date if applicable:	TITARD TO HOTOLOGIA
(no more than 90 days after amendme	ent file date) 2016 SEP -6 AM 9: 21
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing a document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. To must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appro-	val
by	**
by(voting group)	<u> </u>
The amendment(s) was/were adopted by the board of directors without shareholder a action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	n and shareholder
Dated 9210 Signature (By a director president or other officer – if directors or of	
selected, by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary)	trustee, or other court
CHRISTOPTER DISCHI (Typed or printed name of person signin	NŌ g)
ATTORNEY - IN - FA (Title of person signing)	- 1