P15000041532

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2015 MAY 15 FH 2:47

MAY 2 0 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ECO UCD USA IN	NC	
DOCUMENT NUMB			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
(GJON GJOKA		
_		Name of Contact Person	1
ì	ECO UCD USA INC		
-		Firm/ Company	
4	1247 ALESBURY DRIVE		
_		Address	
	ACKSONVILLE, FL 32224	ı.	
-		City/ State and Zip Cod	e
ССТА	X10@ATT.NET		
	E-mail address: (to be us	ed for future annual report	notification)
	concerning this matter, pleas		771 00/0
JOHN D DAVIS	·	at (771-0262
Name of	Contact Person	Area Co	de & 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)
Amer Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

ECO OCD USA INC		D	
(Name of Corpora P15000041532	tion as currently filed with the Florida	Dept. of State)	
	ument Number of Corporation (if known)		
(Doct	ument Number of Corporation (II known)		
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this <i>Florida Profit Corporati</i>	on adopts the following	g amendment(s
A. If amending name, enter the new name of the	corporation:		~ 2
EcoUCD USA INC			The new E
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Cor word "chartered," "professional association," or th	rp," "Inc," or "Co". A professional co		contain the
B. Enter new principal office address, if applicab			
(Principal office address <u>MUST BE A STREET AL</u>	ODRESS)		· 景景 : 2:
			-
	-		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u> </u>		
D. If amending the registered agent and/or regist new registered agent and/or the new registere		e name of the	
Name of New Registered Agent			
	(Florida street address)		
Non-Books and Office Address		Placida	
New Registered Office Address:	(City)	, Florida /Zip (Code)
New Registered Agent's Signature, if changing Re		undanna a Calena na antata n	
I hereby accept the appointment as registered agent.	i am jamiliar with and accept the obligi	ations of the position.	
Sic	enature of New Registered Agent if change	rina	•

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	nes			
X Add	<u>sv</u>	Sally Sn	nith			
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						

lf amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the ame</u> (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y not approcure, material vitt)	

	. 05/12/2015	
The date of each amendment		, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :	05/12/2015	
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this can be Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment re sufficient for approval.	t(s)
	e approved by the shareholders through voting groups. The following statend for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and sharehold	der
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
05/12 Dated	2015	
Signature	storologo for	**************************************
	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other could be a second or ot	
	pointed fiduciary by that fiduciary)	urt
"r	FLORA GJOKA	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	