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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: \_GRITECH USA, Inc. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Eugenio De Medio, President Name of Contact Person Gritech USA, Inc. Firm/ Company 220 Alhambra Circle Suite 610 Address Coral Gables, FL 33134 City/ State and Zip Code eayoub@cifco.us.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Elizabeth Ayoub Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department 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 Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

GRITECH USA, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) H150001737773 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street 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 with and accept the obligations of the position. 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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	<u>s</u>		Karim Fayad	8202 Los Pinos Circle
X Add				Coral Gables, FL 33143
Remove				
2) Change	<del></del>	_		
Add				
Remove				
3) Change	<u></u>	_		
Add				
Remove				<del></del>
4) Change		<del></del>		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
	N/A
<del></del>	
I.S	.h
provisions for implementing the amo	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	N/A

The date of each amendment(s) ad	doption: N/A	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	clock does not meet the applicable statutory filing requirements, this dat partment of State's records.	e 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	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	•
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	<i>11</i>
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	"	
<u> </u>	(voting group)	
☐ The amendment(s) was/were ado action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	opted by the incorporators without shareholder action and shareholder	
Sept 29, 20 Dated	015	
Signature		
	irecter, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court	
	d, by an incorporator – It in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
арро		
	Eugenio De Medio	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	