P15000101152

(Requestor's Name)		
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(D)	ainaa Futitu Nas	
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Canada Instructions to	Tiling Officer	
Special Instructions to	Filing Officer:	





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FILED
2010 NOV 18 PH 12: 47
SEUNETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Suplicy C.E Inc				
DOCUMENT NUMBER: P15000101152				
The enclosed Articles of Amendment and	fee are submitted for filing.			
Please return all correspondence concerning	ng this matter to the following:			
Mario de Aler	Mario de Alencar Netto			
	Name of Contact Person			
	Firm/ Company			
244 Biscayne	Boulevard #452			
	Address			
Miami, FL 331	32			
	City/ State and Zip Code			
malencar@oclover	i. (to be used for future annual report notification)			
E-man address	. (to be used for future annual report noutication)			
For further information concerning this ma	atter, please call:			
Mario de Alencar Netto	at (302-7926			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount	unt made payable to the Florida Department of State:			
\$35 Filing Fee S43.75 Filing Certificate of				
<u>Mailing Address</u> Amendment Section	Street Address Amendment Section			
Division of Corporations				
P.O. Box 6327	Clifton Building			
Tallahassee El 32314	2661 Evenutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Suplicy C.E Inc			
(<u>Name</u>	of Corporation as currently f	iled with the Florida Dept. of	'State)
P15000101152			
	(Document Number of Co	orporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Flo	orida Profit Corporation adopt	s the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
OFTG Capital Inc			The Hew 2
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	". A professional corporation	The new 2 ed" or the abbreviation n name must contain, the
B. Enter new principal office address,	if applicable:		TO K
(Principal office address MUST BE A S	TREET ADDRESS)		是是
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)			
D. If amending the registered agent an new registered agent and/or the new		in Florida, enter the name o	<u>f the</u>
Name of New Registered Agent	Mario de Alencar Nette	0	
	244 Biscayne Bouleva	ard #452	
	(Florida street		
New Registered Office Address:	Miami	, Fk	orida_33132
•	(Cit		(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familiar with	and accept the obligations of stered Agent, if changing	the position.

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>	Name	Address
1) X Change	<u>VP</u>	Roberta, Gralheiro Begliomini	244 Biscayne Blvd
Add			# 452
Remove			Miami, FL 33132
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			·
Remove			
5) Change			
Add			
Remove			
0 0			
6) Change	 		
Add			
Remove			

(Attach addi	or adding additional Articles, enter change(s) here: onal sheets, if necessary). (Be specific)	

provisions	ment provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption: 11/15/2016	if other than the
date this document was signed.	
Effective date if applicable:	
(no more	e than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's recommendation.	ne applicable statutory filing requirements, this date will not be listed as the cords.
Adoption of Amendment(s) (CHECK ON	<u>E</u>)
■ The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group ent	
"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 d action was not required.	lirectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporat action was not required.	ors without shareholder action and shareholder
Dated 11/15/2016	\
Signature	
	her officer \(\) if directors or officers have not been - if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fig	
	•
Mario de Alencar N	
(Typed or	printed name of person signing)
President	
	(Title of person signing)