Division of Corporations Electronic Filing Cover Sheet

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Division of Componations

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Account Name : GREENBERG TRAURIG (OFLANDO)

Account Number : 103731001374

: (407)418-2435

Phone Fay Number

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN STRATCO (US) INCORPORATED

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Resubmittal



October 26, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

STRATCO (US) 1NCORPORATED 430 GORDON STREET SANFORD, FL 32750US

SUBJECT: STRATCO (US) INCORPORATED

REF: P16000100669

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Darlene Connell FAX Aud. #: E20000369114

Regulatory Specialist II Supervisor Letter Number: 920A00021265

(((H200003691143)))

## Articles of Amendment to Articles of Incorporation

Albe	of	
Strateo (US) Incorporated	. •	
(Name of Corporation as	correctly filed with the Florida Dept, o	(State)
P16000100669		
(Document N	Sumber of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statilits Articles of Incorporation:	utes, this Florida Profit Corporation adop	is the following unrendment(s) to
A. If amending name, enter the new name of the corpor	ation:	
N/A		The new
name must be distinguishable and contain the word "corporation," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	"Co". A professional corporation nam	the abbreviation "Corp.," e must contain the word
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRES	(25)	
	**************************************	, <del>1   1   1   1   1   1   1   1   1   1 </del>
	·	
C. Enter new-mailing address, if applicable:	N/A	22 8 T
(Mailing address MAY BE A POST OFFICE BOX)		62. N
D. If amending the registered agent and/or registered o	or address in Florida, arreas the versus	
new registered agent and/or the new registered office	e address:	25 S
Name of New Registered Agent N/A		70.
Name to Sew Registered Agent		
	Florida street address)	
in an atomic of OTE on Additional	£	lorida
New Registered Office Address:	(City)	(Zip Code)
New Registered Agent's Signature; if changing Register I hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept the obligations o	f the position,
Counters	of New Registered Agent, if changing	
Signature	of the section of the section of the section of	
Check if applicable  [1] The amendment(s) is/are being filed pursuant to s. 607.0	0120 (11) (e). F.S.	

## (((H200003691143)))

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:

(Anach 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 = Chairmon 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 Doc	
X Remove	<u>V</u>	Mike Iones	
X Add	<u>\$V</u>	Salty Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	\$	Murepha Smali	430 Gordon Street
Add			Langwood, FL 32771
X Remove			
2) Change	S	Andrea Suggs	430 Gordon Street
X Add			Sanford, FL 32750
Remove 3) Change			
Add			
Кепюче			
4)Change		<u> </u>	
Add			
Remove			
5) Change			Name of the Park o
Add			
Remove			
6) Change			
Add			
Remove			

(((H20000369114 3))) E. If amending or additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
N/A
<u> </u>
F. If an omendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate NA)
····

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The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amondment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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 incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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
(voting group)
October 22, 2020 Dated
Signature
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Benjamin L.T. Miels
(Typed or printed name of person signing)
Vice President
(Title of person signing)