(Requestor's Name)
(Address)
. (Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500315580055

07/11/18--01008--025 \*\*35.00

JUL 1 6 2018 I ALBRITTON

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SK MANAGEME	NT USA CORP	
DOCUMENT NUM	D18000045140		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Albert Corrada		
		Name of Contact Perso	n
	Albert Corrada, CPA		
		Firm/ Company	
	2655 LeJeune Road, Suite 90	)2	
		Address	
	Coral Gables, FL 33134		
		City/ State and Zip Cod	le
	rada@corradacpa.com		
		sed for future annual report	natification)
	E-man address. (to be a	sed for facure armual report	Hothication)
For further informatio	on concerning this matter, pleas	se call:	
Albert Corrada		at (	804-8569
Name	Name of Contact Person at (305 ) 804-8569  Area Code & Daytime Telephone Nu		ode & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Dep	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Cliftor	Address  Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

SK	MANAGEMENT	USA CORP	
21	MANAGEMENT	OBN COR	

(Name of Corporation	as currently filed with the Florida Dept. of State)
P18000045149	
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the observation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.	<u>ESS</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SECO TALLED
•	
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered off	nice address:
Name of New Registered Agent	<u>~</u>
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
	(City) Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	tered Agent: um familiar with and accept the obligations of the position.
Signatu	ure 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 D	<u>loe</u>	
X Remove	<u>V</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change	Р	_	KOWLESSAR, STANLEY N	8360 SW 148TH DRIVE
Add				PALMETTO BAY, FL 33158
X Remove				
2) Change		_		
Add				
Remove				-
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<del>_</del>		
Add				
Remove				
δ) Change		_		
Add				
Remove				

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
<del>-</del>	
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(3)	
<del></del>	

The date of each amendment(	05/15/2018 s) adoption:	, if other than the
date this document was signed.	•	
Effective date if applicable:	05/15/2018	
Energy date it appreade.	ino more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	ent(s)
	e approved by the shareholders through voting groups. The following stad 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	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareh	nolder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	er
07/09/ Dated	2018	
Signature	Tutter Korlever	
( <del>B)</del> sel	a director, president or other officer – if directors or officers have not be ected, by an incorporator – if in the hands of a receiver, trustee, or other pointed fiduciary by that fiduciary)	
	BRITTNEY KOWLESSAR	
	(Typed or printed name of person signing)	<del></del>
	Vice President	
	(Title of person signing)	