## P18000098456

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DEFCOM-AUCTI	ONS USA, INC.	
DOCUMENT NUMB	D10000000151		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
(	Carl De Feyter		
-		Name of Contact Persor	1
-		Firm/ Company	
(	58 SE 6th Street, Apt. 1008		
_	<u> </u>	Address	
1	Miami, FL 33131		
<del>-</del>		City/ State and Zip Code	:
carl@c	lefcom-auctions.com		
<del></del> -	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Carl De Feyter		786	609-6191
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
S35 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		Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

DEFCOM-AUCTIONS USA, INC.

(Name of Corporation as currently	filed with the Florida Dept. of State)
P18000098456	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
IC COOPERATIVE USA, INC.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co" or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2018 DEC 21
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:  Name of New Registered Agent	as in Florida, enter the name of the
Nume of New Registered Agent	
(Florida stree	t address)
New Registered Office Address:	, Florida
	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wi	
Signature of New Reg	gistered 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 Doc				
X Remove	<u>V</u>	Mike Jones				
	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	Address			
1) Change		<u> </u>				
Add						
2) Change						
Add Remove						
3 ) Change		<del></del>				
Add Remove						
4) Change						
Add Remove						
5) Change			<del>-</del>			
Add						
6) Change			<del>-</del>			
Add						

	sary). (Be specific)	,		
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an amendment provides for a	n exchange reclass	ification, or cancella	tion of issued share	S.
	e amendment if not	t contained in the am	endment itself:	<u></u>
provisions for implementing th				
provisions for implementing th (if not applicable, indicate N	<i>V</i> (4)			
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The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
12/03/2018	
Effective date if applicable:  (no more than 90 days after amendment file date)	
(No more than 50 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	je <sup>j</sup>
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
<ul> <li>The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.</li> <li>The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.</li> </ul>	
Signature  (By a director president of 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)  Carl De Feyter	••••••••••••••••••••••••••••••••••••••
(Typed or printed name of person signing)	
President	
(Title of person signing)	