

P120000087152

(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



200266575912

11/20/14--01027--017 \*\*43.75

FILED  
2015 JAN 22 AM 10:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend/cus  
⑩ 1.26.15

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: CF Invest USA, Inc.

DOCUMENT NUMBER: P12000087152

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Claudius Zehnder

Name of Contact Person

CF Invest USA, Inc.

Firm/ Company

C/O 209 SE 5th Avenue

Address

Delray Beach, FL 33483

City/ State and Zip Code

Josh@ZurawCPA.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Josh Geib at ( 561 ) 272-7317  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |                                          |                                                                                |                                                                                            |                                                                                                                |
|------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 2, 2014

CLAUDIUS ZEHNDER  
CF INVEST USA, INC.  
209 SE 5TH AVE  
DELRAY BEACH, FL 33483

SUBJECT: CF INVEST USA, INC.  
Ref. Number: P12000087152

We have received your document for CF INVEST USA, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 314A00025349

*Please see enclosed letter*

RECEIVED  
15 JAN 22 PM 12:19  
REGISTRATION DIVISION  
CORPORATIONS

Articles of Amendment  
to  
Articles of Incorporation  
of

CF Invest USA, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000087152

(Document Number of Corporation (if known))

FILED  
2015 JAN 22 AM 10:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:**

\_\_\_\_\_ The new 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:**

Change                      PT      John Doe

Remove                         V        Mike Jones

Add                                SV      Sally Smith

| <u>Type of Action</u><br>(Check One)          | <u>Title</u> | <u>Name</u>             | <u>Address</u>                 |
|-----------------------------------------------|--------------|-------------------------|--------------------------------|
| 1) <input type="checkbox"/> Change            | <u>VPST</u>  | <u>Franz Hodel</u>      | <u>Schwabistalstrasse 44</u>   |
| <input type="checkbox"/> Add                  |              |                         | <u>5037 Muhen, SW 5037 SW</u>  |
| <input checked="" type="checkbox"/> Remove    |              |                         |                                |
| 2) <input checked="" type="checkbox"/> Change | <u>PST</u>   | <u>Claudius Zehnder</u> | <u>Lottenweg 18</u>            |
| <input type="checkbox"/> Add                  |              |                         | <u>5037 Muhen, Switzerland</u> |
| <input type="checkbox"/> Remove               |              |                         |                                |
| 3) <input type="checkbox"/> Change            |              |                         |                                |
| <input type="checkbox"/> Add                  |              |                         |                                |
| <input type="checkbox"/> Remove               |              |                         |                                |
| 4) <input type="checkbox"/> Change            |              |                         |                                |
| <input type="checkbox"/> Add                  |              |                         |                                |
| <input type="checkbox"/> Remove               |              |                         |                                |
| 5) <input type="checkbox"/> Change            |              |                         |                                |
| <input type="checkbox"/> Add                  |              |                         |                                |
| <input type="checkbox"/> Remove               |              |                         |                                |
| 6) <input type="checkbox"/> Change            |              |                         |                                |
| <input type="checkbox"/> Add                  |              |                         |                                |
| <input type="checkbox"/> Remove               |              |                         |                                |



The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

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 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

by \_\_\_\_\_  
(voting group)"

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 12/17/2014

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)

Claudius Zehnder

(Typed or printed name of person signing)

President

(Title of person signing)