## P19000042871

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ION: NEUHAUSER US	CORP.	
DOCUMENT NUMBER		<u>_</u>	
The enclosed Articles of A	mendment and fee are su	bmitted for filing.	
Please return all correspon	dence concerning this ma	tter to the following:	
Sev	erine Gianese-Pittman, Es	sq.	
		Name of Contact Persor	1
GL	NESE-PITTMAN, P.A.		
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
100	N. Biscayne Blvd., Suite	3070	
<del></del>		Address	
Mia	imi, FL 33132		
		City/ State and Zip Code	:
sgianese@	)sgpittman.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	
Severine Gianese-Pittman	. Esq	at ( 305	722-5986
Name of C	ontact Person		de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐S43.75 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)
Amendr Divisior P.O. Bo	Address nent Section of Corporations x 6327 see, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

INTERPRETATION CONTRACTOR	VEUHAUSER	JUS COR	
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(Name of Corporation	as currently filed with the Florida Dept. of State)
P19000042871	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRI	ESS )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered off	fice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	ered Agent:
	im 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>PΤ</u>	John Doc	
X Remove	$\underline{V}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ALEXIS ELOPHE	22 RUE BROCHANT
, <u>——</u>		-	PARIS, FR 75017 EU
X Remove			
2) Change	S	NICOLAS PAREZ	8 RUE DES BLEUETS
Add			PERENCHIES, FR 59840 EU
X Remove			
3 ) Change	T	ALEXIS ELOPHE	22 RUE BROCHANT
Add			PARIS, FR 75017 EU
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	adding additional Art al sheets, if necessary).	(Be specific)			
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lf an amendme	nt provides for an excl implementing the amo	hange, reclassifica	tion, or cancellation	i of issued shares, Imant itself:	
(if not an	licable, indicate N/A)	. nament ii not <u>con</u>	tained in the amen	intent itseir.	
119	,				
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The date of each amendment(s) adde this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were as by the shareholders was/were	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
6/4/2019		
Dated Signature		
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	MARC AUCLAIR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	