

FOY0000156430

(Registrant's Name)



- 2350 S US Highway 17-92, Suite 1010.  
Longwood, Florida 32750  
407-678-1505

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

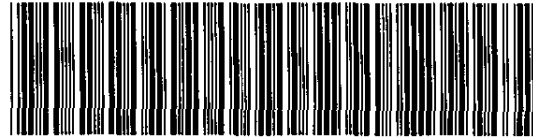
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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R. WHITE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** EURO Specialists, Inc.

**DOCUMENT NUMBER:** PG4000156430

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

Please return all correspondence concerning this matter to the following:

James E. Smeltzer  
Name of Contact Person

EURO Specialists, Inc.  
Firm/ Company

2350 S US Highway 17-92  
Address

Longwood, FL 32750  
City/ State and Zip Code

smeltzersusan@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James E. Smeltzer at (407) 678-1505  
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 &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

13 NOV 22 AM 11:59

EURO Specialists, Inc.

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P 04 000 156430

(Document Number of Corporation (if known))

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

Type of Action  
(Check One)

Title

Name

Address

- |                                            |           |                         |                            |
|--------------------------------------------|-----------|-------------------------|----------------------------|
| 1) <input type="checkbox"/> Change         | <u>TS</u> | <u>James E. Smelter</u> | <u>2350 S US Hwy 17-92</u> |
| <input type="checkbox"/> Add               |           |                         | <u>Longwood, FL 32750</u>  |
| <input checked="" type="checkbox"/> Remove |           |                         |                            |
| 2) <input type="checkbox"/> Change         | <u>TS</u> | <u>Susan E. Smelter</u> | <u>2350 S US Hwy 17-92</u> |
| <input checked="" type="checkbox"/> Add    |           |                         | <u>Longwood, FL 32750</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            |           |                         |                            |

**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

NA

**F. If an amendment 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 N/A)*

Article IV

50% of shares owned by James E. Smeltzer

50% of shares owned by Susan E. Smeltzer

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

Effective date if applicable: November 19, 2013  
(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 November 19, 2013

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)

James E. Smeltzer

(Typed or printed name of person signing)

President

(Title of person signing)