## P09000026694

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: DHAEZE USA;IN	iC.	
DOCUMENT NUM	BER: P09000026694		
The enclosed Articles	s of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	itter to the following:	
	PAM MCKINNEY		
		Name of Contact Perso	n
	SUMMIT QUEST INC		
		Firm/ Company	
	3433 E GULF TO LAKE HV	VY	
		Address	<del></del>
	INVERNESS FL 34453		
		City/ State and Zip Cod	е
	PAMMCKINNEYUS@GMA	All COM	
	<del>-</del>	sed for future annual report	notification
		and the second s	· ····································
For further information	on concerning this matter, pleas	se call:	
PAM MCKINNEY		at ( <sup>352</sup>	, 584-1498
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

DHAEZE USA, INC.

	ently filed with the Florida Dept. of S	tate)
P09000026694	<u> </u>	
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his <i>Florida Profit Corporation</i> adopts t	he following amendment(s)
A. If amending name, enter the new name of the corporation	Ē	
		The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.	A professional corporation name n	abbreviation "Corp.," nust contain the word
3. Enter new principal office address, if applicable:		
Principal office address MUST BE A STREET ADDRESS )		23
		رت
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		214
		<u> </u>
		<del></del>
). If amending the registered agent and/or registered office a	ddress in Florida, enter the name of t	<u>the</u>
new registered agent and/or the new registered office addr	ess:	<del></del>
Name of New Registered Agent		
	-	<del></del>
(Florida	street address)	<del></del> _
New Registered Office Address:	<b>73</b>	,
Hegister Office Hadress		da(Zip Code)
		, <b>,</b> , ====,
lew Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am familio	ent:	
as registered agent. I am jamine	ir wan and accept the obligations of the	g position.
Signature of New	Registered Agent, if changing	······
heck if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	mith_	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change	VP	_	ANTONIUS VAN USEN	5085 E ROSEHILL DR
X Add				FLORAL CITY, FL 34436
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

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)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	-

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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after an	nendment file date)
Note: If the date inserted in this block does not meet the applicable statutory locument's effective date on the Department of State's records.	filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of direct action was not required.	ors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of vo by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gr must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient for	or approval
by	
(voting group)	
Signature  (By a director, president or other officer – if directo selected, by an incorporator – if in the hands of a reappointed fiduciary by that fiduciary)	
	W.M. REUCEN, POA
(Typed or printed name of person	n signing)
P.O.A	<i>c c</i> ,
(Title of person signing)	