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SECRETARY OF STATE

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C. LEWIS NOV 8 2013 EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: CITY BOEL	JF USA, INC.		
DOCUMENT NUMBE	_{R:} P1100000210	7		
	Amendment and fee are sul			
Please return all correspo	ondence concerning this mat	ter to the following:		
C	CHRISTOPHE PI	LLET		
_		Name of Contact Person	L Company	
C	CITY BOEUF US	A, INC.		
		Firm/ Company		
2047 N University drive				
_		Address		
(Coral Springs Flo	rida 33071		
_		City/ State and Zip Code		
onille	st2211@amail.co	nm.		
Cpine	et2211@gmail.co			
	E-mail address: (to be us	ed for future annual report	nourication)	
For further information of	concerning this matter, pleas	e call:		
Christophe Pil	let	at (954	4615125	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	rtment of State:	
■ \$35 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)	
Mailir	ng Address	Street .	Address	
Amen	dment Section	Amend	ment Section	
Division of Corporations		Division of Corporations		
	Sox 6327		Building	
i aliah	assee, FL 32314	2001 E	xecutive Center Circle	

Tallahassee, FL 32301

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Articles of Amendment

A	to rticles of Incorporation	TALLAHASSEE, FLORIDA
Mit Back	of // S.A. T	
(Name of Corporation as currently file	d with the Florida Dept. of St	nte)
PILO	0002107	_
(Document Number of C		
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this <i>Florida Profit Cor</i>	poration adopts the following amendment(s)
A. If amending name, enter the new name of the cor-	poration:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the all	"Inc," or "Co". A profession	r "incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u></u>	
	 	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	7	
(Manual Manual M	,	
	 	
		
D. If amending the registered agent and/or registered		er the name of the
new registered agent and/or the new registered of	ffice address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	tered 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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{y}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Р	PILLET, PATRICK	4172 INVERRARY DRIVE
Add			BLD 7 APT 112
Remove			LAUDERHILL, FL 33319
2) Change	VP	PILLET, CHRISTOPHE	3680 INVERRARY DRIVE
Add			BLD ORLEANS APPT 3K
Remove			LAUDERHILL, FL 33319
3) Change	T	PILLET, MARTINE H	3680 INVERRARY DRIVE
Add			BLD ORLEANS APPT 3K
Remove			LAUDERHILL, FL 33319
4) Change	S	PILLET, FLORENCE	4172 INVERRARY DRIVE
Add			BLD 7 APT 112
Remove			LAUDERHILL, FL 33319
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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			- · · · - · · · · · · · · · · · · · · ·	
V = VI				
	·			
191				
· 127 · · · · · · · · · · · · · · · · · · ·				•
				
	····			
				_
an amendment provides for an exch rovisions for implementing the amer	ange, reclassit adment if not a	<u>ication, or cance</u> contained in the	ellation of issued s amendment itself	hares,
(if not applicable, indicate N/A)				-
		.		
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	SECRETARY OF STATE TALL ARE SSEE. Fit 6thbig than d	
The date of each amendment(s) adoption date this document was signed.	on:	ne
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 was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) nt for approval.	
	I by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for th	e amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated 10/31/2013 Signature	F Patrol	
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)	
PIL	LET PATRICK	
_	(Typed or printed name of person signing)	
PR	ESIDENT	
	(Title of person signing)	

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