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(((H16000224027 3)))



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Division of Corporations

Fax Number

: (850)617-6380

Account Name

: SMART ACCOUNTING CORP

Account Number : I20140000063

Phone

: (786)536-7882

Fax Number

: (786)703-7962

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:
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## COR AMND/RESTATE/CORRECT OR O/D RESIGN

EURO KOSMETIK USA INC

R. WHILE

Certificate of Status	0
Certified Copy	0
Page Count	01
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

H 16,000224027 3

NAME OF CORPORA	EURO KOSMETIK USA INC				
DOCUMENT NUMBI	P12000079244				
The enclosed Articles of	Amendment and fee are so	abmitted for filing.			
Please return all corresp	ondence concerning this ma	atter to the following:			
		MIGUEL E LARA BER	OVIDES		
_	Name of Contact Person EURO KOSMETIK USA INC				
_		Firm/ Company			
		6950 West 6 Ave Apt 510			
_	Address HIALEAH, FL 33014				
<del>-</del>		City/ State and Zip Coo	ie		
	A	VTAXSMART@GMAIL.	00 <u>M</u>		
	E-mail address: (to be u	sed for future annual report	notification)		
For further information o	concerning this matter, plea	se call:			
MIGUEL E LAR	A BÉROVIDES	305 at (	923-6097		
Name of Contact Person			ode & Daytime Telephone Number		
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:		
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	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			

SMART ACCOUNTING COR

Articles of Incorporation P -9 AM 8: 43

" BURO KOSME"	TIKEUSA INC
(Name of Corporation as currently fi	iled with the Florida Dept, of State)
P120000	779244 .
(Document Number of Co	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this $Fk$ its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P./	". A professional corporation name must contain the
•	N/A
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
N/A	
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	. Florida
(Ci	
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 Pool	stered Apent 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)

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Please note the officer/director stile 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> <u>Jo</u>	hn <u>Doe</u>	
X Remove	<u>v</u> <u>M</u>	ike Jones	•
X Add	<u>SV</u> Sa	ally Smith	
Type of Action (Check One)	<u>Tîtle</u>	Name	<u>Address</u>
1) Change	VP	MARIO A LARA	6950 WEST 6 AVE
Add			APT 510
X Remove		. •	HIALEAH FL 33014
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	M		
Add			
Remove		_	
5)Change			<u></u>
Add			
Remove			
6) Change			
Add			
Remove			

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SMART ACCOUNTING COR

PAGE 05/06

(Attach additional sheets, if necessary). (Be specific)	H 16000224027.
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,	
	<u></u>
If an amendment provides for an exchange, reclassification, or cance	llation of issued shares,
provisions for implementing the amendment if not contained in the a (if not applicable, indicate N/A)	amendment itself:
<del>v.</del>	

	8/31/2016	H160002240273
The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	8/31/2016	
	no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block does not document's effective date on the Department of Sta		eents, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
■ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	ureholders. The number of votes east for the royal.	amendment(s)
The amendment(s) was/were approved by the sh must be separately provided for each voting granter		
"The number of votes cast for the amenda	nent(s) was/were sufficient for approval	
by		
(voting	group)	
The amendment(s) was/were adopted by the box action was not required.	ard of directors without shareholder action an	nd shareholder
The amendment(s) was/were adopted by the inc action was not required.	orporators without shareholder action and sh	areholder
Dated 9/8/20	16	
Signature		
(By a director, presider	nt of other officer - if directors or officers ha	ve not been
	prator - if in the hands of a receiver, trustee,	
	MIGUEL E LARA BEROVIDES	
(Ту	ped or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>