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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AUTOLUCK USA	A INC				
DOCUMENT NUMBER: P13000016942					
The enclosed Articles of Amendment and fee are su	ubmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
ELENA SOSNOVSKAYA					
	Name of Contact Person				
	Firm/ Company				
2200 NE 11 STREET					
Address					
HALLANDALE, FL 33009					
	City/ State and Zip Code				
LENOK69@HOTMAIL.COM					
E-mail address: (to be u	sed for future annual report notification)				
For further information concerning this matter, plea	se call:				
ELENA SOSNOVSKAYA	at () 699-5969				
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:				
\$35 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)				
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

AUTOLUCK USA INC			
(Name of Corporat	ion as currently filed with the Florida De	ept. of State)	
P13000016942			
(Docum	ment Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this Florida Profit Corporation	adopts the following ar	mendment(s) to
A. If amending name, enter the new name of the c	corporation:		
		Th	ie new
name must be distinguishable and contain the wo. "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	o," "Inc," or "Co". A professional corpo	porated" or the abbro	eviation
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 BO	<u></u>	SECRETALLY STATES	TILED THE
D. If amending the registered agent and/or registered new registered agent and/or the new registered		ame of the	F F
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Cod	e)
New Registered Agent's Signature, if changing Rest hereby accept the appointment as registered agent.		ons of the position.	
Sign	nature of New Registered Agent if changing	2	

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	NATALIA BARBACHKOVA	16051 COLLINS AVE APT 1402
Add			SUNNY ISLES BEACH
X Remove			FL 33160
2) Change			_
Add			
Remove			
3) Change			-
Add '			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) (Be specific)			
		· 		
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•				
			ssued shares,	
f an amendment provides for an exc	hange, reclassification	n, or cancellation of i	4 24 16-	
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification andment if not contai	n, or cancellation of i	t itself:	
provisions for implementing the ame	hange, reclassificatio endment if not contai	n, or cancellation of I	<u>t itself:</u>	
provisions for implementing the ame	hange, reclassificatio endment if not contai	n, or cancellation of I	t itself:	
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provisions for implementing the ame	hange, reclassificatio endment if not contai	n, or cancellation of I	t itself:	
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If an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassificatio endment if not contai	n, or cancellation of I	t itself:	
provisions for implementing the ame	hange, reclassificatio endment if not contai	n, or cancellation of I	t itself:	

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
Note: If the date inserted in this blo document's effective date on the Department	ck does not meet the applicable statutory filing requirements, this dartment of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendment(scient for approval.	s)
☐ The amendment(s) was/were appromust be separately provided for each	oved by the shareholders through voting groups. The following statement of voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	er .
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
09/21/2016	/	
Dated		
Signature		
(By a dire selected,	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other coun fiduciary by that fiduciary)	rt
Α	NATOLII BARBACHKOV	
_	(Typed or printed name of person signing)	
P	RESIDENT AUSTOLIA BERBERKOZ	
	(Title of person signing)	