## P13000099045

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA		SSETS CONSULTIN	IG CORPORATION
	P13000099045		· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBE	ZR:	·	
The enclosed Articles of	FAmendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
k	(el Nozaki		
- F	Aczento Consulting G	Name of Contact Person roup Corp	
8	41 PRUDENTIAL DR	Firm/ Company	
J	acksonville, FL 32207	Address 7	
_		City/ State and Zip Code	;
usa@	aczento.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Kei Nozaki		904	647.4566
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	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)
Amer Divis P.O. I	ng Address dment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301

## Articles of Amendment to Articles of Incorporation of

EUROPEAN ASSETS CONSULTING ( (Name of Corporation as current)		Stote)	
P13000099045	Y rued with the Plorida Dept. of 2	inte	
(Document Number	r of Corporation (if known)		·······
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	rida Statutes, this <i>Florida Profit Co</i>	orparation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the N/A	t corporation:		
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	orp," "Inc," or "Co". A professi	or "incorporated" or the ional corporation name mu	The new abbreviation st contain the
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET A	able: ADDRESS )		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u> )		<del></del>
D. If amending the registered agent and/or reginew registered agent and/or the new register	istered office address in Florida, cred office address;	enter the name of the	_
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	_
New Registered Agent's Signature, if changing	Degistered Agents		

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: X.Change	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	SEC	Kei Nozaki	841 PRUDENTIAL DRIVE
Add			JACKSONVILLE
Remove			FL 32207
2) Change			
Add	<del></del> .		<del>-</del>
Remove			
3) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti- (Attach additional sheets, if necessary).	(Be specific)
/A	(
<u></u>	
	<u> </u>
	,
<u> </u>	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	
(If we are the black of the All A)	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Fitting it is not companied at the amendment becar
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(if not applicable, indicate N/A)	FRUMENT IN MY COMMUNES IN THE SINVENDING INTEREST
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The date of each amendment(s	s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voling group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
04/08 Dated	//2014	
Signature	be Non	
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court sointed fiduciary by that fiduciary)	_
	Kei Nozaki	
	(Typed or printed name of person signing)	<del></del>
	Incorporator Ke Now.	_
	(Title of person signing)	_