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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : RABIDEAU KLEIN
Account Number : 120200000035
Phone : (561)655-6221
Fax Number : (561)655-3221

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

EMAIL Address: GRABIDE AUGRABIDE AUG

COR AMND/RESTATE/CORRECT OR O/D RESIGN CROISIEUROPE AMERICA CORP.

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Неф

P.O. Box 6327 Taliahassee, FL 32314

COYER LETTER

| TO: Amendment Sec Division of Corp | | | | | |
|---------------------------------------|--|--|---|---------------------------------------|----------------------------|
| NAME OF CORPO | PRATION: CROISIEUROPE | AMERICA CORP. | | _ | |
| DOCUMENT NUM | BER: P14000054237 | | | _ | |
| The enclosed Articles | s of Amendment and fee are su | bmitted for filing. | | | |
| Please return all corre | espondence concerning this ma | tter to the following: | | | |
| | GUY RABIDEAU | | | | |
| | | Name of Contact Person | <i>`</i> | | |
| | RABÍDEAU KLEÍN | | • | | |
| | | Firm/ Company | | | |
| | 440 ROYAL PALM WAY, | SUITE 101 | | | |
| | | Address | | | |
| | PALM BEACH, FL 33480 | | | 202 ⁴ | |
| | | City/ State and Zip Cod- | ¢ | | |
| | GRABIDEAU@RABIDEAU | JKLEIN.COM | | | es Liber Professor M |
| | E-mail address: (to be us | sed for future annual report | notification) | 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | \bigcap |
| For further information | on concerning this matter, plea | se call: | | 2024 OCT 11 AM 9: 40 | O |
| GARRETT ELLIS | | at (<u></u> | 655-6221 | 6 | |
| Name | of Contact Person | Arca Co | de & Daytime Telephone Nu | amber | |
| Enclosed is a check f | or the following amount made | payable to the Florida Depa | artment of State: | | |
| S35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Piling Fee & Certified Copy (Additional copy is enclosed) | S\$2.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| An Div | ailing Address acadment Section vision of Corporations D. Box 6327 | Amend Divisio | Address Iment Section on of Corporations entre of Tallahassee | | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

| (Name of Corporation as currently filed with the Florida Dept. of State) P14000054237 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) | Ŷ |
|---|--------------|
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| (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: | |
| C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address: | |
| Name of New Registered Agent | |
| (Florida street address) | |
| New Registered Office Address: Florida | |
| (City) (Zip Code) | |

☐ 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 | PI | <u> John Doe</u> | |
|----------------------------|------------|--------------------|-----------------------------|
| X Remove | Y | Mike Jones | |
| <u>X</u> Add | <u>\$v</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) Change | D | JOEL ERICKSON | 365 Route 304 |
| X Add | | | Suite 101 Since 101 |
| Remove | | | Nanuci, NY 10954 |
| 2) Change | D | SANDRAH GURASH | 365 Route 304 |
| X Add | | | Suite 101 |
| Remove | D | JOHN MCGLADE | Nanuer, NY 10954 |
| 3) Change | | JOHN MCGLADE | 365 Route 304, Suite 101 |
| Add | | | Nanuet, NY 10954 |
| X Remove | | | |
| 4) Change | D | FRANCIS SIMONKLEIN | 12 RUE DE LA DIVISION LECLE |
| Add | | | STRASBOURG, FR 67000 FR |
| X Remove | | | |
| 5) Change | D | MICHAEL DACOSTA | 365 ROUTE 304 STE 101 |
| Add | | | NANUET, NY 10954 |
| X Remove | | | |
| 6) Change | - | | |
| Add | | | |
| Remove | | | |

| tisch additional sheets, if necessary). (Be specific) | |
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| Attach additional sheets, If necessary). | cles, enter change(s) here: (Be specific) | | |
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| The date of each amendment(s) adoption: 7/22/2024 date this document was signed. | if other than th |
|--|---------------------------------------|
| Effective date if applicable: | |
| (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records. | vill not be listed as th |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required. | nd shareholder |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | |
| The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | 20 |
| by CraisiEurope, America Cong board | 77 I |
| Dated_10/4/2024 | |
| Signature Condition | 01:6 |
| (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – If in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | 6 |
| Toel Erickson (Typed or printed name of person signing) | · · · · · · · · · · · · · · · · · · · |
| Director (Title of person signing) | |