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(((H16000269590 3)))



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To:

Division of Corporations

Fax Number

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NOV 02 2016

Account Name

: EXPRESS ACCOUNTING AND INCOME TAX SVCS CORP.

Account Number : I20060000141

Phone

: (561)929-6899

Fax Number

: (954)788-7400

R. WHILE

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

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LOUZIEH USA CORP

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	P	···	
DOCUMENT NUMBER: P16000030158			
The enclosed Articles of Amendment and fee are subm	itted for filing.		
Please return all correspondence concerning this matter	to the following:	•	
ANIBAL QUINTATO			
	Name of Contact Pe	erson)	
EXPRESS ACCOUNTING INCOME TAX SERVICE	CORP		
	(Firm/ Company	7)	
3927 N FEDERAL HWY			
	(Address)		
POMPANO BEACH, FL 33064			
	City/ State and Zip	Code)	
anibalquintao@hotmail.com			,
E-mail address: (to be used	for future annual rep	ort notification)
For further information concerning this matter, please of	:all:		
ANIBAL QUINTAO	at	(954)	788-7400
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida l	Department of S	State:
\$35 Filing Fee \$\sum \text{S43.75 Filing Fee & Cartificate of Status}	\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi is Certifi	D Filing Fee cate of Status ed Copy tional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ar Di Cl: 26	reet Address mendment Secti vision of Corpo ifton Building 61 Executive C illahassee, FL 3	enter Circle

Articles of Amendment to

16 NOV - 1 AH 8: 50

Articles of Incorporation

SECRETARY ELLAST TALLAHASEN ELLAST

LOUZIEH USA CORP		174	T. P. H. W. D. C. C. C. C. C. C. C.
(Name of Corporation a	s current	ly filed with the Florid	Dept. of State)
P16000030158			
(Docume	at Numbe	r of Corporation (if know	(IIw
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation;	ia Statutes	s, this <i>Florida Not For I</i>	Profit Corporation adopts the following
4. If amending name, enter the new name of the c	orporatio	on:	
LOUZIEH DOCES USA CORP			The new
name must be distinguishable and contain the word " "Company" or "Co," may not be used in the name.	'corporati	ion" or "incorporated"	
		16956 PAVILION WA	Y
B. Enter new principal office address. if applicable Principal office address <u>MUST BE A STREET AD</u>	DDDCCV	DELRAY BEACH, FL	33446
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)		16956 PAVILION WA	Y
	•	DELRAY BEACH, FL	33446
D. If amending the registered agent and/or register new registered agent and/or the new registered			nter the name of the
······································		GUSTO CARVALHO E	ENOLIEL
		VILION WAY	
		(Florida street address)	
		ВЕАСН	Florida 33446
-		(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.			e obligations of the position.
	××	gnature of New Register	red Agent, if changing

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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 X Remove X Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P 	JOSE AUGUSTO C BENOLIEL	16956 PAVILION WAY
Add			DELRAY BEACH, FL 33446
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add Remove			
5) Change Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional As (attach additional sheets, if necessary).	rticles, enter change(s) here:		
(attach additional sheets, if necessary).	. (Be specific)		
			
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	e date of each amendment(s) this document was signed.	adoption:	, if other than the
	_		
eff	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
		block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/wer was/were sufficient for appa	e adopted by the members and the number of votes east for the amendme oval.	nt(s)
	There are no members or m adopted by the board of dir	embers entitled to vote on the amendment(s). The amendment(s) was/we ectors.	ere .
	Dated NOVE	MBER, 1ST 2016	
	Signature		
	(By the c have not	hairman or vice chairman of the board, president or other officer-if direct been selected, by an incorporator — if in the hands of a receiver, trustee, urt appointed fiduciary by that fiduciary)	
	JOSE	AUGUSTO CARVALHO BENOLIEL	
		(Typed or printed name of person signing)	
	PRE	SIDENT	
		(Title of person signing)	_