F05000065642

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: EVE ERNS	T VETTER GMI	BH COMPANY		
	BER: F0500000564				
	of Amendment and fee are sul				
Please return all corre	spondence concerning this mat	ter to the following:			
	MARENA LOEFF	LER			
	Name of Contact Person ALLURE ACCOUNTING, INC.				
	3665 BONITA BE	·	JITE 1-3		
	Address BONITA SPRINGS, FL 34134				
NV	ISSCHER@ALLU	City/ State and Zip Code RETAX.COM			
		ed for future annual report	notification)		
For further information concerning this matter, please call:					
NANTJE VIS	SCHER	_{at (} 239	9923355		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made p	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)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301		

Articles of Amendment Articles of Incorporation

14 JUL 17 PH 2: 29 .

EVE ERNST VETTER GMBH COMPANY

(Name of Corporation as currently filed with the Florida Dept. of State)

nent(s) to

F05000005642	,
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendments
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain ti
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 BOX)	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	
THE STATE OF THE PROPERTY AND ADDRESS.	
(Florida	street address)
New Registered Office Address: (Cu	Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familia	
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	PT	John Di	<u>>e</u>	
X Remove	¥	Mike Jo	ones	
X Add	<u>sv</u>	Sally St	nith	
Type of Action (Check One)	Title		Name	<u>Address</u>
1) Change	VTS		VETTER, DENNIS	RASTATTER STR. 30
Add				PFORZHEIM, GE 75179
Remove				GERMANY
2) Change		-		
Add				
Remove				
3) Change			-	***************************************
Add				
Remove				
4) Change		·		etylsky.
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				**************************************
Remove				**************************************

mending or adding additional Art such additional sheets, if necessary).). (Be specific)
	The state of the s
I an amendment provides for an exc provisions for implementing the am	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	JULY 10, 2014	
	(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 east for the amendment(s) re sufficient for approval.	
	approved by the shareholders through voting groups. The following statement of 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	
by	"	
	(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	
Dated JULY	(10. 2014	
Signature	1. boh	
. •	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 pointed fiduciary by that fiduciary)	
	HERMANN VETTER	
	(Typed or printed name of person signing)	
	Р	
	(Title of person signing)	111111111111