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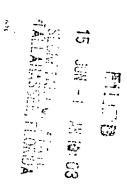
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Southern CP, Inc.		
DOCUMENT NUM	D15000020000		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Nick Barbato		
	·	Name of Contact Person	1
	Southern CP, Inc.		
		Firm/ Company	
	335 N Magnolia Ave Suite 30	03	
		Address	
	Orlando, FL 32801		
		City/ State and Zip Code	2
NBa	rbato1990@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Nick Barbato		at (<u></u> 954	579-2672
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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	iling Address endment Section rision of Corporations D. Box 6327	Amend Divisio	Address ment Section on of Corporations Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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15 期 - 1 八海:03 SOUTHERN CP, INC. (Name of Corporation as currently filed with the Florida Dept. of State) JALLANGISCO, I LUNGA P15000030090 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its 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) 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 agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 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>	<u>Addres</u> s		
1) Change	TS	Ryan D'Agostino	320 N MAGNOLIA AVE, STE B6		
Add X Remove			ORLANDO, FL 32801		
2) Change					
A dd					
Remove					
3) Change					
Add					
Remove			 		
4) Change					
Add					
Remove					
5) Change					
Add					
Remove			 		
6) Change					
Add					
Remove					

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fan am	iendment prov	vides for an ex	change, recla	ssification, or	cancellation	of issued shar	es,	
provision	ons for impler	menting the an indicate N/A)	<u>nendment if n</u>	ot contained i	n the amendr	nent itself:		
(1)	чы аррисавіе,	inaicaie MA)						
			 	 				
								

	5/28/2015
The date of each amendment(s) a date this document was signed.	doption:, if other than the
Effective date if applicable:	•
Energy take it appreciate.	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder action and shareholder
5/28/2015	
DatedSignature	MErimo
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court attend fiduciary by that fiduciary)
	Nicholas Barbato
	(Typed or printed name of person signing)
	President
	(Title of person signing)