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DEC 1.4 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Industrial Consulta	ants and Management Com	pany
DOCUMENT NUM	210017		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	Elliott Harris, Esq.		
		Name of Contact Perso	n
	Elliott Harris, P.A.		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	111 SW 3rd Street, PH		
		Address	
	Miami, Florida 33130		
		City/ State and Zip Cod	e
ehan	ris@eharrispa.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Elliott Harris		at (<u>305</u>	358-0146
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:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

INDUSTRIAL CONSULTANTS AND MANAGEMENT COMPANY

(Name of Corporation as curre	ently filed with the Florida Dept. of State		
24	19914		
(Document Numbe	er of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the fo	ollowing amen	dment(s) t
A. If amending name, enter the new name of the corporation:			
		The	
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," of word "chartered," "professional association," or the abbreviation	r "Co". A professional corporation name	the abbrevia must contain	tion the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			_
			_
			
C. Enter new mailing address, if applicable:		ALL AN SECRE	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u> </u>	
		SSE C	_ [
		M = 3	. \ \ \ K.
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office address	ddress in Florida, enter the name of the ess:	SINIE SINIE	ر مور مور
Name of New Registered Agent			
(Florida	street address)		
New Registered Office Address:	, Florida		_
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Age			
I hereby accept the appointment as registered agent. I am familia	or with and accept the obligations of the pos	ition.	
Signature of Nov	Registered Sount 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>N'ame</u>	<u>Addres</u> s
1) Change	DP	MANUEL P. ARCA	6355 SW 48th Street
Add			Miami, Florida 33155
X Remove			
2) Change	T ———	KRISTOFER C ARCA	7310 SW 104th Street
Add			Miami, Florida 33156
X Remove			
3) Change	D	SARDINIA SERGIO	6355 SW 48th Street
Add			Miami, Florida 33155
X Remove			
4) X Change	PD	MANUEL E ARCA	6355 SW 48th Street
Add			Miami, Florida 33155
Remove			
5) Change	,		
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

	articles, enter change(s) here: i). (Be specific)	
·		_
an amendment provides for an axe	change, reclassification, or cancellation of issued shares.	
provisions for implementing the ame	nendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:, if other date this document was signed.	her than the
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 will not be lidocument's effective date on the Department of State's records.	isted as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
November 14, 2019 Dated	
Signature MM Map - My.	
(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)	
MANUEL E ARCA	
(Typed or printed name of person signing)	-
Director	
(Title of person signing)	-