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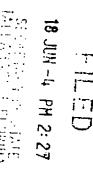




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AND R. WHITE JUN 0 5 2018



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: FLORIBEC INTE	RNATIONAL, INC.			
DOCUMENT NUMB					
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corre	spondence concerning this ma	itter to the following:			
	SHIRLEY K ROWELL				
		Name of Comact Person	n		
	FLORIBEC INTERNATION	NAL. INC			
		Firm/ Company			
	428 WALNUT ST				
		Address			
	GREEN COVE SPRINGS, FL 32043				
		City/ State and Zip Cod	e		
SHIR	LEYROWELL@DUVALFII	ELDS COM			
	•	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
SHIRLEY K ROWEI	1.	9t4	769-1069		
Name of Contact Person		at (de & Daytime Telephone Number		
.vaine	of Comact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r 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)		
Mailing Address Amendment Section		Amend	Address Iment Section		
	sion of Corporations	Division of Corporations			
- · · ·	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle				
Tallahassee, FL 32.					

FILED

18 JUN -4 PM 2: 26

Articles of Amendment to Articles of Incorporation

SPORTAL YOR STATE MALLAGA YOR LURIDA

FLORIBEC INTERNATIONAL, INC.		
	on as currently filed with the Florid	ia Dept. of State)
\$43354 (Docum	nent Number of Corporation (if knows	
(Deal)	nent (sunder of Corporation (if knows	11
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corpora	ntion adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the wor "Corp." "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	." "Inc." or "Co". A professional i	incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if applicable	<u> </u>	
(Principal office address <u>MUST BE A STREET ADD</u>	DRESS)	
		,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or register	ed office address in Florida, enter t	he name of the
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent		
		·
	(Florida street address)	
New Registered Office Address:		. Florida
Sea registera Orace stata ess.	(City)	(Zip Code)
		·
New Registered Agent's Signature, if changing Regi	istered Agent:	
hereby accept the appointment as registered agent	l am familiar with and accept the obli	gations of the position
		
Signa	ature of New Registered Agent, if char	nging

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, F-- 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	PT	John Doe		
X Remove	<u>Y</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) X Change	VSD	ROWELL, SHIRLEY K	428 WALNUT ST	
Add			GREEN COVE SPRINGS, FL	
Remove			32043	
2) Change				
Add				
Remove				
3) Change		**************************************		
Add			**	
Remove				
4) Change				
Add			· · · · · · · · · · · · · · · · · · ·	
Remove				
51 Change				
Add				
Remove				
6) Change	•			
Add				
Remote				

E. <u>If amend</u> (Attach <i>ac</i>	ling or adding additional Ar additional sheets, if necessary)	ticles, enter change((Be specific)	s) here:		
N/A		. ,			
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				= -	_
	<u> </u>				
			···		
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	,	·• · · · · · · · · · · · · · · · · · ·			
. If an ame	endment provides for an exc as for implementing the am	hange, reclassification	on, or cancellation ined in the amenda	of issued shares,	
(if no	ot applicable, indicate NA)				
N A					
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					_
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··	· · · · · · · · · · · · · · · · · · ·				

5/17/2018	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
5:17/2018	
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 da document's effective date on the Department of State's records.	te will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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 statements is separately provided for each voting group entitled to vote separately on the amendment(s)	ni
"The number of votes cast for the amendment(s) was/were sufficient for approval	
he	
by	
The amendment(s) was were adopted by the board of directors without shareholder action and shareholde action was not required.	it.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated Mary Coff City	
Signature	·····
(By a director, president or other officer - if directors or officers have not been	
selected, by an incomporator - if in the hands of a receiver, trustee, or other cour	t
арроinted fiduciary by that fiduciary)	
THOMAS SCHAD	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	