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DIVISION OF CORPORATION

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COVER LETTER

TO: Amendment Section **Division of Corporations** In Action International Inc NAME OF CORPORATION: DOCUMENT NUMBER: __NO 080 0000 7736 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & \$35 Filing Fee \$43.75 Filing Fee & \$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address **Amendment Section Amendment Section**

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

to

Articles	of	Incor	poration

Articles of fueor poration	
land in the line of	
JOIL IN HOTOU INTERNATIONALIME,	
(Name of Corporation as currently filed with the Florida Dept. of State)	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> 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" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co," may not be used in the name.	
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)	
DIVIS	22
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	RETARY
	OF STIONS
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:	S
Name of New Registered Agent: 9/// 2 (imm 200/ At //)ar/	
New Registered Office Address: 2468 CI mm drok Hok Way (Florida street address)	
HOOPKA, Florida 32703 (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)

<u>Title</u>	Name		Address	Type of Action
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Vice P.	HIDA E. P.	aedo Escabi	• • • • • • • • • • • • • • • • • • • •	Add Remove
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(attach add	ng or adding addition ditional sheets, if necess	sary). (Be specific		
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states	: the tre	esident (connot be remo	oveD.
				
The (Officers:	DORA /	ibrieros (PEES)	
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			4. Fl 32703 _	_
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		MpOpl.	LA FC 327	03
				

The date of each amendment	t(s) adoption: <u> </u>
Effective date <u>if applicable</u> :	SAM C
in a province of the second se	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of dir	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated	2/27/09 Dag Abreros
(By	the chairman or vice chairman of the board, president or other officer-if directors be not been selected, by an incorporator — if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Open Liberros (Typed or printed name of person signing)
	Peesident (Title of person signing)