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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: <u>FLORIDA</u>	VINE TONDICAL P	esentch Ecologica	l'Exchange
NAME OF CORPORATION: HOKEVA	KBY) (100) 1071CIC	examin devic just	-
DOCUMENT NUMBER: NO 900	000 2950		·
The enclosed Articles of Amendment and fee	are submitted for filing.		,
Please return all correspondence concerning th	is matter to the following:		
1	RICHARD KEEF		
	(Name of Contact Perso		
TREE INSTI	TUTE LATTERNA	TION IAL.	
, weep 14-511	TUTE INTERNA (Firm/Company)	HUNAC	
			·
1850 SW	8th St Sult	204A	·
	(Address)	•	
Mia	(City/ State and Zip Cod	33135	
	(City/ State and Zip Cod	(e)	
fw Kee	fe1@aol.com		
E-mail address: (to	be used for future annual report	notification)	
For further information concerning this matter,	please call:		
RICHARD Keefe	;·at	305 304 1729 rea Code) (Daytime Teleph	· .
(Name of Contact	Person) (A	rea Code) (Daytime Teleph	one Number)
Enclosed is a check for the following amount r	nade payable to the Florida Dep	artment of State:	
□ \$35 Filing Fee □\$43.75 Filing Certificate of	Fee & U\$43.75 Filing Fee & Status Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address	Street	<u>Address</u>	
A am Jan am t Ca at la m	A	Income December	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

17 JUN -5 PM 6: 22

Articles of Amendment to Articles of Incorporation of

	ECOLOGICAL EXCHANGE INSTITUTE,		
(Name of Corporation as current	tly filed with the Florida Dept. of State)		
4090000029	50		
(Document Number	er of Corporation (if known)		
ursuant to the provisions of section 617.1006, Florida Statutes nendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following		
If amending name, enter the new name of the corporation	on:		
TREE INSTITUTE INTERNATIO	NAL INC The new		
ame must be distinguishable and contain the word "corporati	tion" or "incorporated" or the abbreviation "Corp." or "Inc."		
Company" or "Co." may not be used in the name.			
Enter new principal office address, if applicable:	1850 SW 8+1 Street Suite 204		
rincipal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL 33135		
	MINMI, PC 99193		
	·		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS ABOVE		
If amending the registered agent and/or registered offic	e address in Florida, enter the name of the		
new registered agent and/or the new registered office ac			
Name of New Registered Agent:			
Name of New Registered Agent			
<u> </u>			
New Registered Office Address:	(Florida street address)		
	(City) , Florida (Zip Code)		
w Registered Agent's Signature, if changing Registered			
ereby accept the appointment as registered agent. I am fan	nitiar 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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Si	nes		**		,	,	
Type of Action (Check One)	Title		Name					<u>Addres</u> s	
1) Change		_							
Add									· · · · · · · · · · · · · · · · · · ·
Remove					,				·
2) Change		_							
Add	•	•			,	•			· · · · · · · · · · · · · · · · · · ·
Remove 3) Change					-				
Add									
Remove 4) Change		_				· · · · · · · · · · · · · · · · · · ·			
Add					٠	. •			
5) Change	<u></u>	_			•				
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	ng additional Articles ets, if necessary). (Be							
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The date of each amendment(s) date this document was signed.	adoption: 5.31.2017	, if other than the
Effective date <u>if applicable:</u>		·
	(no more than 90 days after amendment file d	ate) .
Note: If the date inserted in this l document's effective date on the l	plock does not meet the applicable statutory filing requi Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	• •
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast toval.	for the amendment(s)
There are no members or me adopted by the board of dire	mbers entitled to vote on the amendment(s). The amendment	dment(s) was/were
Dated	5.31. 2017	
Signature	Bichard Aufe	<u> </u>
(By the ch have not	airman or vice chairman of the board, president or othe been selected, by an incorporator — if in the hands of a r rt appointed fiduciary by that fiduciary)	
· .	RICHARD KEEFE	•
•	(Typed or printed name of person sign	ning)
•	PRESIDENT	•
	(Title of person signing)	i •