N14000010761

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
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COVER LETTER

Division of Corporations		4	i.
ThumbsUp NAME OF CORPORATION:	International, INC		7
N1400001076			
The enclosed Articles of Amendment and fee ar	e submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Caryn Lubetsky			
	(Name of Contact Person	on)	
ThumbsUp			
	(Firm/ Company)		
9953 NE 4th Avenue Road			
	(Address)		
	(City/ State and Zip Coo	de)	
carynlubetsky@me.com			
E-mail address: (to be	e used for future annual report	notification)	
For further information concerning this matter, p	please call:		
Caryn Lubetsky	305 at (505-1164)	
(Name of Contact Person)	(Area (Code & Daytime Telephone Numbe	r)
Enclosed is a check for the following amount ma	ade payable to the Florida Dep	partment of State:	
□ \$35 Filing Fee ■\$43.75 Filing For Certificate of St	ee & \$\subseteq\$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		t Address	
Amendment Section Division of Corporations		dment Section	
P.O. Box 6327		on of Corporations n Building	
Tallahassee, FL 32314		Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

(Name of Corporation as currently N14000010761.	ntly filed with the Florida Dept.	. of State)	
(Do	ocument Number of Corporation	(if known)	
Pursuant to the provisions of section 61' amendment(s) to its Articles of Incorpor		rida Not For Profit Corporatio	on adopts the following
A. If amending name, enter the new	name of the corporation:		
			The new
name must be distinguishable and conta "Company" or "Co." may not be used		ncorporated" or the abbreviat	ion "Corp." or "Inc."
B. Enter new principal office address			
(Principal office address <u>MUST BE A</u>			
			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if app			
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX		一意をか
			ニーニー
			SE 5 M
D. If amending the registered agent a		in Florida, enter the name of	the From P. 3.1
new registered agent and/or the n	ew registered office address:		92 - S
Name of New Registered Agen	t :		
New Registered Office Addres	(Florida stre <u>ss</u> :	et address)	
		. Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if			
		and accept the obligations of	

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 A Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	D	Kerry Gruson	1000 Venetial Causeway
X Add			Miami, Florida 33139
Remove			
2) Change	\triangleright	Albert Llorda	4090 Laguna Street, 2nd F
2) Change X Add			Coral Gables, Florida 33146
Remove 3) Change	De	Caryn Lubetsky	9953 NE 4th Ave Rd
Add			Miami Shores, FI 33138
Remove			
4) Change	<u>P</u>	Cristina Ramirez	851 Anastasia Avenue
Add			Coral Gables, Florida 3313
Remove			
5) Change			
Add			
Remove			
6) Change			<u></u>
Add	•		
Remove			

attach additional sheets, if necessar	ry). (Be specific	nange(s) here:)		
		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
		 		
	· · · · · · · · · · · · · · · · · · ·			
				<u> </u>

	e date of each amendment(s) adoption: this document was signed.	_, if other than the
Effe	ective date <u>if applicable</u> :	_
	(no more than 90 days after amendment file date)	
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 1-8-15 Signature	_
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Caryn Lubetsky	
	(Typed or printed name of person signing) Executive Director/President	
	(Title of person signing)	