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TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORAT	Burrell Internationa TON:	l Corporation		
DOCUMENT NUMBER	N20000012230			
The enclosed Articles of A	I <i>mendment</i> and fee are sub	mitted for filing.		
Please return all correspon	dence concerning this matt	ter to the following:		
Summer R Burrell				
		(Name of Contact P	erson)	
Burrell Internationanl Cor	poration			
		(Firm/ Compan	y)	
4530-15 St. Johns Ave. #3	26			
		(Address)	<u></u>	
Jacksonville, Florida 3221	0-3318			
		(City/ State and Zip	Code)	
summer@innovationsbrii.	com			
	E-mail address: (to be used	for future annual rep	port notification	n)
For further information co	ncerning this matter, please	call;		
Summer R Burrell		at	904	716-9299
	(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	ayable to the Florida	Department of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certifi	O Filing Fee icate of Status ied Copy tional Copy is used)
Mailing			eet Address	
	ent Section of Corporations		nendment Secti	· · · · ·
COSIM	or corporations	1211	asion of Corba	1F311/111\$

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Burrell International Corporation

(Name of Corporation as currently filed with the N20000012230)	<u>ie rioriu:</u>	(Dept. of State)	
		1 60	
(Docu	ment Nun	iber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation:	orida Stat	ites, this Florida Not For Profi	it Corporation adopts the followin
A. If amending name, enter the new name of the Burrell International Service Corporation	ie corpor	ation:	
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam	d "corpo <u>te</u> .	cation" or "incorporated" or th	The nev ne abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applications of the control of the cont	able: 4DDRES	N/A S)	
 			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	N/A	7.78 [7]
			3 PP TH
). If amending the registered agent and/or regi	istered of	fice address in Florida, enter i	the name of the
new registered agent and/or the new register Name of New Registered Agent:	red office N/A	address:	the name of the : w
	N/A		
<u>New Registered Office Address</u>	:	(Florida sire	vet address)
	N/A	<i>1</i> 222	Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing be hereby accept the appointment as registered agents.	Registere u. Lam f	d Agent: amiliar with and accept the obli	igations of the position.
-		Signature of New Registered Ag	ent. 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 = ChiefExecutive 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	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add		<u>N/A</u>	
Remove			
2) Change Add		N/A	
Remove Change Add Remove		<u>N/A</u>	
4) Change Add		<u>N/A</u>	
Remove		_	
5) Change Add	 -	N/A	
Remove		-	
6) Change Add		<u>N/A</u>	
Remove		-	
E. If amending or addin (attach additional sheet	g additional Artists, if necessary).	cles, enter change(s) here: (Be specific)	
N/A	_		
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		_ _
	N/A	
The date of each amendment(s) adoption	n:	, if other than the
date this document was signed.		
Effective date if applicable:		
Enecuse date it applicable;	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do	es not meet the applicable statutory filing requirements, this date wi	ill not be listed as the
document's effective date on the Departm	ent of State's records.	
Adultic up a de la constitución	(CMP) (MA)	
Adoption 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 November 9, 2020
	Signature I RISh
	(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)
	Summer R Burrell
	(Typed or printed name of person signing)
	President

(Title of person signing)