N460086

Office Use Only



900293032469

01/26/17--01006--026 **43.75



EFFECTIVE DATE

Jeb 1, 2017

JAN 31 2017

I ALBRITTON

COVER LETTER

Inc.

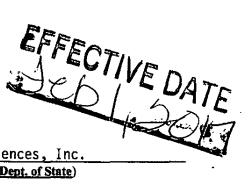
TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: The Internation	onal Institute o	f Forensic Engineering Science	₽Ş,
DOCUMENT NUMBER: N46086		- ·	_
The enclosed Articles of Amendment and fee are subr	nitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
Paul J. Halyard	(Name of Contact Perso	n)	_
	(Name of Contact Ferso	ni <i>)</i>	
Peninsula Forensic Engineering,	Inc.		
	(Firm/ Company)		_
632 Stetson Street			_
	(Address)		
Orlando, FL 32804			_
	(City/ State and Zip Con	de)	
paul@paulhalyard.com			
E-mail address: (to be used	l for future annual report	notification)	
For further information concerning this matter, please	call:		
Paul J. Halyard	at 4	407-422-5599	
(Name of Contact Person) (A	Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made pa	yable to the Florida Dep	partment of State:	
□ \$35 Filing Fee	□\$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 Compositions		ndment Section ion of Corporations	

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

Articles of Amendment to Articles of Incorporation of



The International Institute of Fore			
(Name of Corporation as cur		lorida Dept. of State)	
N46086			
(Document N	umber of Corporation (i	if known)	
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not</i>	For Profit Corporation ado	pts the following
A. If amending name, enter the new name of the corpo	oration:		
International Board of Forensic Eng	ineerina Servic	es. Inc.	The new
name must be distinguishable and contain the word "corp	oration" or "incorport	ated" or the abbreviation "C	Corp." or "Inc."
"Company" or "Co." may not be used in the name.			
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRE</u>	N/A :SS()		
		1.1	
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		
(Mulling dutiess MAT DE A FOST OFFICE DOA)	W/B		म्हर्ग 🕟
	`		<u> </u>
			R
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Flori ce address:	da, enter the name of the	0: 4:3
Name of New Registered Agent:	N/A		
		(Florida street address)	
New Registered Office Address:		(rioriuu sireei auaress)	
	N/A	, Florida _	
	(City)	(Zip Co	de)
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I are		ept the obligations of the po.	sition.
	N/A		
		gistered 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	PT Y SV	John Doe Mike Jones Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1)Change	N/A	<u> </u>			· <u>-</u>
Add					
Remove					· · · · · · · · · · · · · · · · · · ·
2) Change					
Add				<u> </u>	
Remove					······································
3)Change					
Add			•		
Remove					
4) Change					
Add					
Remove					<u> </u>
5)Change					
Add		•			
Remove					
6) Change		_			
Add				- Francisco (Francisco	
Remove					

Ŀ.	If amending or adding additional Ar (attach additional sheets, if necessary).	ticles, enter change(s) here:		
	(attach adattonal sheets, if necessary).	(De specific)		
	·			
	<u>N/A</u>			
	<u> </u>			·····
		 		
_				
		·		
				
				
_				
-	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
			<u> </u>	
				· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	han the
Effective date if applicable: February 1, 2017 (no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.	the
Adoption of Amendment(s) (CHECK ONE)	
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.	
Signature January 24, 2017	
(By the chamitan 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)	
Paul J. Halyard (Typed or printed name of person signing)	
Secretary (Title of person signing)	