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C LEWIS

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR	ATION: ROSS	INTERHATION	IAL, INC	
DOCUMENT NUMBER: P02 0000 423 86				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corres _i	pondence concerning this ma	tter to the following:		
	Ken	WEAH MARN	πας	
_		Name of Contact Person		
	ROSS INTERNATIONAL, INC			
-		Firm/ Company		
-	4110		AVE., # 204	
		Address		
_		NAPUES F. City/ State and Zip Cod	L 34104	
_		City/ State and Zip Cod	e	
KENG COVERUPDESIGN. COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
VENNETH MARWICK at (239) 793-4889				
	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Os52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>Mail</u>	ing Address	Street	Address	

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

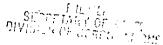
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee. FL 32301

Articles of Amendment

to

Articles of Incorporation





	of		The state of the s
Ross	INTERNATIONAL	INC.	15 NOV 23 PM 2:57
	of Corporation as currently filed v		
	P 020000 42	-386	
	(Document Number of Corpor	ration (if known)	
Pursuant to the provisions of section 607.: its Articles of Incorporation:	1006. Florida Statutes, this <i>Florida</i>	Profit Corporati	lon adopts the following amendment
A. If amending name, enter the new na		1	
	N	A	The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp," "Inc," or "Co". A		
B. <u>Enter new principal office address, i</u> (Principal office address <u>MUST BE A ST</u>		<u>N/A.</u>	
C. Enter new mailing address, if applic (Mailing address <u>MAY BE A POST C</u>		N/A	
D. If amending the registered agent and new registered agent and/or the new		lorida, enter the	e name of the
Name of New Registered Agent	KENNETH MAR	wick	
	8735 GASTLI	INE CT,	#202
New Registered Office Address:	NAPUES		, Florida 34120
	(Ciṇ·)		(Zip Code)
New Registered Agent's Signature, if ch Thereby accept the appointment as registe		accept the oblig	ations of the position.
	Verse	L	<u></u>
	Signature of New Registered	d Agent, if chang	ing

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	<u>PT</u> <u>John I</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
l) Change	PTD	MIGHELLE COMBS	5810 SHASY OAK LANE
Add			NADUSS FL 34119
Remove			
2) X Change	PSD	ANN YUILLE	8443 SEDONIA CIRCLE
Add			FOR MYERS, FL33912
Remove			
3)Change	VID	KENNETH MARWICK	8735 GASTLINE G, #202
X Add			NAPLES FL 34120
Remove			
4) Change	VD	ELIZABETH MARWICK	8735 GASTLINE GT #202
Add			NAPUES FL 34120
Remove			
	7	JAMES YUILLE	Odd 2 Committee Court
5) Change		7 March 101000	FORM MYERS, FL 33912
Add			HALF 1-146125, PL 35912
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if n	itional Articles, enter ch lecessary). (Be specific)		
	A/14	·		
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With the state of				
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an amendment provides : provisions for implementing (if not applicable, indicable)	ng the amendment if not			ı
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	NIA			
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The date of each amendment(s) adoption:	1011/2	015	if other than the
date this document was signed.			St. Track Property
Effective date if applicable:	10/1/20	715	MAIN IN THE POST OF THE PARTY O
(no	more than 90 days after amer	ndment file da	ne) 15 NOV 23 PM 2: 57
Note: If the date inserted in this block does not me document's effective date on the Department of State		ling requireme	ents, this date will not be listed as the
Adoption of Amendment(s) (CHECK	ONE)		
The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for approx	holders. The number of votes val.	cast for the a	mendment(s)
☐ The amendment(s) was/were approved by the shar must be separately provided for each voting group			
"The number of votes cast for the amendmen	nt(s) was/were sufficient for ap	pproval	
by		·"	
(voting g	roup)		
☐ The amendment(s) was/were adopted by the board action was not required.	l of directors without sharehole	der action and	d shareholder
☐ The amendment(s) was/were adopted by the incorpaction was not required.	porators without shareholder a	ection and sha	reholder
Dated 11 12	2015		
Signature \\	THAT		
	or other officer – if directors of	or officers hav	e not been
· · · · · · · · · · · · · · · · · · ·	ntor – if in the hands of a recei	ver, trustee, o	r other court
appointed fiduciary by the	• •		
VE	WEATH MARNIE	inck	
(Type	ed or printed name of person si	igning)	
	VTC	>	
	(Title of person signing))	