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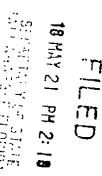
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R. WHITE MAY 22 2018



COVER LETTER

TO: Amendment Section Division of Corporations

NIME OF CORPORATION SOLEM 1	of Nurseau my
NAME OF CORPORATION: <u>Safen Le</u> DOCUMENT NUMBER: <u>P02000100</u>	207
DOCCMENT NOMBER. 1-0 2010 100	
The enclosed Articles of Amendment and fee are sul	bmitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Josuc	Same of Contact Person
<u>Saten Le</u>	Firm/ Company
<u>1987 z</u>	SW 282 Terrace.
Homestee	ad, FL 33033 City/ State and Zip Code
For further information concerning this matter, please	
Alba Guandique	at (<u>305</u>) <u>216 - 5340</u> Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
S35 Filing Fee	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

FILED

Articles of Amendment to

to Articles of Incorporation 18 MAY 21 PH 2: 18

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(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: _____, Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 4

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>Joh</u>	ın Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	<u>ly Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	_5_	Josue Guandique	13872 SIN 287 Terrace
X Add			Homestead, Fl 33033
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•	ticles, enter change(s) here: (Be specific)

f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the amo	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) and date this document was signed.	option:, if other the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required. The amendment(s) was/were add	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
action was not required.	
Dated $5/1$	
Signature	rector of side of other officer - if directors or officers have not been
(By a d	rector president of other officer. If directors of others white not been
	by an incorporator – if in the hands of a receiver, trustee, or other court
appoin	ed fiduciary by that fiduciary)
	EIMER GUMNDIQUE (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Pas.
	(Title of person signing)