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# COR AMND/RESTATE/CORRECT OR O/D RESIGN. INTERNATIONAL CORPORATE ART, INC.

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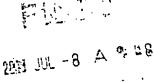
TO: Amendment Sec Division of Con	porstions				
NAME OF CORPO	RATION: INTERNATIONA	L CORPORATE ART, INC	<u>-</u>		
	BER: P03000043253				
The enclosed Article	s of Amendment and ice are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Richard A. Jacobson, Esq.				
		Name of Contact Person	1		
	Buchanan Ingersoll & Roone	y PC			
	Firm/ Company				
	401 E. Jackson St., Suite 2400				
		Address			
	Tampa, FL 33602				
		City/ State and Zip Code			
	E-mail address: (to be us	sed for future ennual report	notification)		
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Enclosed is a check t	for the following amount made	payable to the Florida Depe	artment of State:		
□ \$35 Filing Fee	■\$43.75 Filing Fee & Cortificate of Status	S43.75 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
Tallahasses, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation



of INTERNATIONAL CORPORATE ART, INC. (Name of Cornoration as currently filed with the Florida Dept. of State) P03000043253 (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: N/A (Mailing address MAY BE A POST OFFICE BOX) 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 sireei oddress) New Registered Office Address: , Florida\_ (CII)) (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 I of 4

Signature of New Registered Agent, If changing

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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 = Trustce; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an afficer/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.

X_Change	et	John Doe			
X Remove	Y	Mike Jones			
X Add	<u>\$Y</u>	Sally Smith			
Type of Action (Check One)	Title	Name	Address		
2) Change	P	KAI SVEUM	1450 MADRUGA AVE		
Add			302		
X Remove			CORAL GABLES, FL 33146		
2) Change	P	ANGELA ANIELLI	1450 MADRUGA AVE		
X Add			302		
Remave			CORAL GABLES, FL 33146		
3)Change					
Add					
Remove			·		
4) Change					
Add					
Remove					
5) Change		_	<u> </u>		
Add			•		
Remove					
6) Change					
Add	<del></del>				
Remove					
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if an Am provisi (if	gendment provides f lone for implementin not applicable, indica	or an exchange, of the amendment ale N/A)	reclassification of if not contain	or cancellation ed in the amend	of issued share ment Itself:	£
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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were at by the shareholders was/were:	dopted by the shareholders. The number of votes east for the amendment(s $sufficient$ for approval.	)
	pproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
The amendment(s) was/were as action was not required.	sopled by the board of directors without shareholder action and shareholde	г
The amendment(s) was/were as action was not required.	depted by the incorporators without shareholder action and shareholder	
Dated	7/8/2019	
Signature		
(By a	director, president or other officer - if directors or officers have not been	<del></del>
sclect	ed, by an incorporator – if in the hands of a receiver, trustee, or other court nied fiduciary by that fiduciary)	
аррог	,	
	Richard A. Jacobson	
	(Typed or printed name of person signing)	
	Authorized Agent	
	(Title of person signing)	