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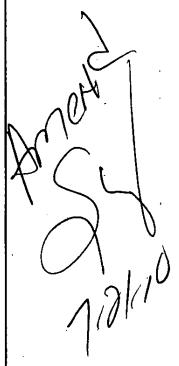
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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPOR	RATION:	Phemmy Ventures	
 DOCUMENT NUME	BER:	P03000068838	
The enclosed Articles	of Amendment and fee a	are submitted for filing.	
Please return all corres	pondence concerning th	is matter to the following:	
	Va	enan E. Nanakumo	.
·		Name of Contact Person	· · · · · · · · · · · · · · · · · · ·
	<i>"</i>	Firm/ Company	· · ·
	1419 W.	. Waters Ave Suite # 109	
		Address	
•		mpa, Florida 33614 City/ State and Zip Code	
	ana@ke E-mail address: (to be use	nnedeeglobal.com ad for future annual report notification)	·
For further information	n concerning this matter,	please call:	
		at ()	
Name of C	ontact Person	at ()	lephone Number
Enclosed is a check fo	r the following amount n	nade payable to the Florida Depar	tment of State:
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate 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 Se	_	Street Address Amendment Section	

- Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment Articles of Incorporation

TALLAHASSEE FLORIGA of Phemmy Ventures INC. (Name of Corporation as currently filed with the Florida Dept. of State)

P03000068838			
(Document)	Number of Corporat	ion (if known)	
Pursuant to the provisions of section 607. amendment(s) to its Articles of Incorporation		tes, this <i>Florida F</i>	rofit Corporation adopts the follo
A. If amending name, enter the new name	e of the corporatio	<u>n:</u>	
name must be distinguishable and conta abbreviation: "Corp.," "Inc.," or Co.," or name must contain the word "chartered,"	the designation "C	orp," "Inc," or "(Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Suite # 109		1419 W. Wate	ers Ave
		•	
		Tampa, FI 336	614
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		1419 W. Wate	rs Ave
	w*.	Suite # 109 Tampa, Fl 336	14
D. If amending the registered agent and/ new registered agent and/or the new i			a, enter the name of the
Name of New Registered Agent:	Venan E. Na	nakumo	
	1419 W. Wat	ters Ave Suite #	109
New Registered Office Address:	(Flori	ida street address)	
•	Tampa (City)		, Florida_33614 (Zip Code)
New Registered Agent's Signature, if cha	, ,,,		(Zip Code)
I hereby accept the appointment as register	ed agent. I am fami	iliar with and acce	ot the obligations of the position.
· ·	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)

<u>Title</u>	Name	Address	Type of Action
P	Venan E. Nanakumo	1419 W Waters Ave Suite 109	. ☑ Add □ Remove
er e		Tampa, Fl 33614	. — Remove
<u>VP</u>	Venan E. Nanakumo	1419 W. Waters Ave Suite 109	☑ Add □ Remove
	•	Tampa, Fl 33614	
<u>S</u>	Venan E, Nanakumo	1419 W Waters Ave Suite 109 Tampa, Fl 33614	✓ Add ☐ Remove
	ding or adding additional Articles, edditional sheets, if necessary). (Be see the second sheets)		
(anuch a	uunionai suceis, ij necessary). (Be s	specific)	
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		e, reclassification, or cancellation of iss	
provisi (if n	ons for implementing the amendment to applicable, indicate N/A)	nt if not contained in the amendment i	tself:
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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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u> </u>	Olufemi Ademoye	1419 W Waters Ave Suite 109	_ ☑ Add □ Remove
		Tampa. Fl 33614	-
			_ □ Add □ Remove
			- M Kemove
*.			Add
₩.			Remove
E. If amendi	ng or adding additional Articles, e	enter change(s) here:	
(attach add	litional sheets, if necessary). (Be s	specific)	
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	s for implementing the amendment in applicable, indicate N/A)	nt if not contained in the amendment	<u>itself:</u>
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The date of each amendmen	nt(s) adoption: <u>07/08/2010</u>	
Effective date <u>if applicable</u> :	(date of adoption is required)	
•	(no more than 90 days after amendment file date)	-
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
• • •	ere adopted by the shareholders. The number of votes cast for the an were sufficient for approval.	nendment(s
•	ere approved by the shareholders through voting groups. The following ded for each voting group entitled to vote separately on the amendment	-
"The number of votes by-	s cast for the amendment(s) was/were sufficient for approval	
	(voting group)	
action was not required. The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and share	eholder
Dated_07/0	09/2010	
Signature _	flight -	
sel	by a director, president or other officer – if directors or officers have relected, by an incorporator – if in the hands of a receiver, trustee, or of epointed fiduciary by that fiduciary)	
	Venan E. Nanakumo	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	