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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORP USA

Account Number: 072450003255

; (305) 634-3694

Fax Number

: (305)633-9696

Enter the email address for this business entity to be used for future vannual report mailings. Enter only one email address please.

Email Address:

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3/16/2017

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Division of Corporations

Fax Number : (850) 617-6380

From:

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Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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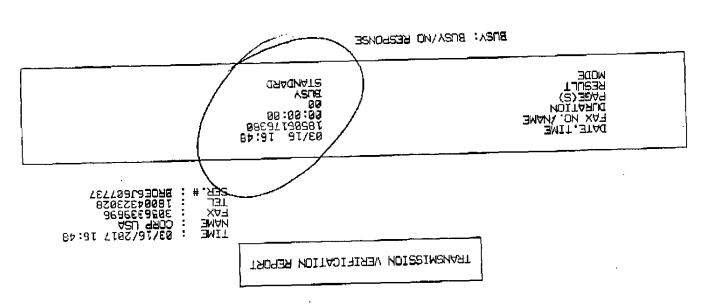
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Articles of Amendment to Articles of Incorporation of

| | filed with the Florida Dept. of State) |
|---|--|
| 03000110429 | |
| (Document Number of | Corporation (if known) |
| ursuant to the provisions of section 607.1006, Florida Statutos, this F s Articles of Incorporation: | Sorida Profit Corporation adopts the following amendment(s |
| . If amending name, enter the new name of the corporation: | |
| | The new |
| ame must be distinguishable and contain the word "corporation. Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "C ord "chartered," "professional association," or the abbreviation "P | o". A professional corporation name must contain the |
| Enter new principal office address. If applicables | <u>≱</u> ∺ 3 |
| rincipal office address MUST BE A STREET ADDRESS) | > att == |
| · | |
| | <u> </u> |
| . Enter new mailing address, if applicables | ्रे ^{क्} ष्ट्र |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| | Part and the second sec |
| . If amending the registered agent and/or registered office address: | ss in Florida, enter the name of the |
| Name of New Registered Agent | |
| | and and analysis |
| (Florida erres | adares) |
| New Registered Office Address: | , Florida |

Page 1 of 4

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 aud/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office stile:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CBO = 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 PID.

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 | PT | John Doc | |
|-------------------------------|--------------|--------------|------------------------|
| X Remove | ¥ | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| i) Change | D | ANAMUL HAQUE | 91 NW 34 AVE |
| Add | | | FT LAUDERDALE FL 33311 |
| X Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | • | |
| 3)Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Кеточе | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

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| Attach additions | adding additional Art il sheets, (f necessary) | (Be specific) | | | |
|------------------|--|--|--|-----------------------------------|--|
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| provisions for | nt provides for an excl implementing the sime licable, indicate N/A) | annee, reclassification adment if not conta | on, or cancellation ined in the amand | of larned shares, ment itself: | |
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| The date of each amondment(s) as | lapdon: | 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 b document's effective date on the De | lock does not meet the applicable statutory filing requirements, this date will parament of State's records. | not be listed as the |
| Adoption of Amendment(s) | (CRECK ONE) | |
| The amendment(s) was/were add by the shareholders was/were su | pited by the shareholders. The number of votes cast for the amendment(s) fficient for approval. | |
| | reved by the shereholders through voting groups. The following statument each voting group entitled to vote separately on the amendment(s): | |
| The number of votes cast | for the amendment(a) was/were sufficient for approval | |
| by | | |
| -, | (voting group) | |
| sotion was not required. The amendment(s) was/were add | opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder | |
| action was not required. | | |
| 03/15/2017 Dated | | |
| Simone | - Fig | |
| (By a d | irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) | |
| | ANAMUL HAQUE | |
| | (Typed or printed name of person signing) | |
| | DIRECTOR | |
| | (Title of person signing) | |

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