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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section Division of Corporat			
NAME OF CORPORATION OF A PRINCIPLE O	i/ 171	$JSCM_100036$	AMI) INC 650
Please return all correspon	ndence concerning this mat	ter to the following:	
	JOHN	Name of Contact Person	STENVIK
<u>Jo</u>		Firm/ Company 251H Address EACH City/ State and Zip Code PENDENT M ed for future annual report	SWITE #8 FL 33064 PARITIME. COMP notification)
For further information co	oncerning this matter, pleas	e call:	
JOHN E. Name of C	STENVIK Contact Person	at (954 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailin	g 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	
KGJS (MIRMI) INC	•
(Name of Corporation as currently filed with the Florida Dept. of St	ate)
P04000036650	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Col</i> its Articles of Incorporation:	rporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: NDEPENDENT MARITIME CONSULTINATION OF COMPANY, CORP., "Inc.," or Co., " or the designation "Corp.," "Inc.," or "Co". A profession of the corporation of the cor	or "incorporated" or the abbreviation
word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, en	ter 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.

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 <math>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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	·	· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

	nge(s) here:	
		
		·
		
usedenset enoughes for an avalonge realongif	ination or concellation of insued shares	
nendment provides for an exchange, reclassifi ions for implementing the amendment if not c	contained in the amendment itself:	
not applicable, indicate N/A)		
		. <u> </u>
		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 03 - 09 - 2015 (no more than 90 days after amendment file date)	_
(no more than 20 days after amenament file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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	
(voling group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 03-04-2015	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
JOHN EINAR STENVIK	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	