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☐ WAIT	MAIL			
(Business Entity Name)				
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SCORETARY OF CLASS

AUG 2 2 2018 T. LEVALOR



COVER LETTER

NAME OF CORPORATION: International Languages Service, Indocument number: Po500000 3324
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person International Languages Service, Inc. Firm/ Company 376 Stone bridge Dr. Address Drange Park FL 32065 City/ State and Zip Code 115 @ 115 @ X. COLM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (904), 485-8983 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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

Articles of Amendment

Articles of In	corporation
International Langua	Car Car
(Name of Corporation as current	A LAGY A
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following anaendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2376 Stonebridge Dr. Drange Park, FL 32065
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2376 Stonebridge Dr. Drange Park, FL 32065
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address	
Name of New Registered Agent TOWN AT	reyoure
2376 Stone brid (Florida si	dac Dr. tree) address)
New Registered Office Address: Way	(City) . Florida 3 7 (Sip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signáture 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 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)	Title	<u>Name</u>	Address
1) Change		Silvan Prendi	1207 Wetland Ridg
Add Remove			Middleburg, FL 3206 8
2) Change Add	<u>_p</u>	John Arroyave	2376 Stonebridge D Drange Park, FL
Remove 3) Change Add	VI	Brad Matos	32085 1207 Wetland Ridge Middle burg, Fl 32063
Remove 4)	<u>5</u> _	Christian Matas	1207 Wetland Ridge Middleburg, FL
Remove Change Add		<u> </u>	
Remove			
Remove			

. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(i) not applicante, mateute (VA)	
M. B 2.	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: AUGUST 20, 2018	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	ll not be listed as the
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" (voting 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 August 16,2018	
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 Arroyave	
(Typed or printed name of person signing)	
Yresident	
(Title of person signing)	