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Amend

10 JUL - 1 PM I2: 33

COVER LETTER

• TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 6/0601	Resource Enterpried, Inc			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Richard Vollroth Name of Contact Person				
Na	me of Contact Person			
Global Resource Enterprises, Inc				
5921 Lowell Rd.				
	Address			
Tampo FL 33624 City/ State and Zip Code				
City	y/ State and Zip Code			
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, p				
Richard Vollrath	at (813) 300 0333			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:			
\$35 Filing Fee \$\ Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Mailing Address 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

to

Articles of Incorporation of

(Name of Corporation as curr	ently filed with the Flori	ida Dept. of State) PM 12: 33
		Mildelay of 12:33
(Document Nur	mber of Corporation (if kn	nown) PM 12: 33 SEE, FLORIDA
		THE STATE OF THE S
rsuant to the provisions of section 607.100 endment(s) to its Articles of Incorporation:	o, Florida Statutes, this I	rioriaa proju Corporation adopts the foil
If amending name, enter the new name o	f the corporation:	
		The new
Enter new principal office address, if app	alion blas	
rincipal office address <u>MUST BE A STREE</u> Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFI</u>)	ET ADDRESS)	in Florida, anter the name of the
rincipal office address <u>MUST BE A STREE</u> Enter new mailing address, if applicable	ET ADDRESS)	in Florida, enter the name of the
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICAL III) If amending the registered agent and/or a new registered agent and/or the new registered.	ET ADDRESS)	in Florida, enter the name of the
rincipal office address MUST BE A STREE Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE) If amending the registered agent and/or a	ET ADDRESS)	in Florida, enter the name of the
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICAL III) If amending the registered agent and/or a new registered agent and/or the new registered.	ET ADDRESS)	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICAL III) If amending the registered agent and/or new registered agent and/or the new registered Agent:	CE BOX) registered office address stered office address:	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI) If amending the registered agent and/or new registered agent and/or the new registered Agent:	CE BOX) registered office address stered office address:	address)
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI) If amending the registered agent and/or new registered agent and/or the new registered Agent:	registered office address stered office address: (Florida street (City)	address), Florida

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) **Type of Action** Title **Name** <u>Address</u> Prosident Rachel Vollrath **⊠** Remove President Marianne Vollrath K. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) K If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) adoption:)		
(qate of adoption	ı is required)		
Effective date if applicable:			
- (no more than 90 days after amend	ment file date)		
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	number of votes cast for the amendment(s)		
The amendment(s) was/were approved by the shareholders thro must be separately provided for each voting group entitled to ve			
"The number of votes cast for the amendment(s) was/were	sufficient for approval		
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
by			
The amendment(s) was/were adopted by the board of directors action was not required.	without shareholder action and shareholder		
The amendment(s) was/were adopted by the incorporators with action was not required.	out shareholder action and shareholder		
Dated 6/85/10			
Signature Luhard Vel	hath		
(By a director, president or other officer			
selected, by an incorporator – if in the hands of a receiver, trustee, or other court			
appointed fiduciary by that fiduciary)			
Richard Vollrath (Typed or printed name of person signing)			
(Typed or printed name of person signing)			
Dir of Openo (Title of person signing)	tions		
(Title of person signing)			