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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Apex Training Cen	ster, Inc.	
DOCUMENT NUM	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Stephane W. Lherisson		
	_	Name of Contact Person	1
	Apex Training Center, Inc.		
	· = ·	Firm/ Company	
	12490 NE 7th Ave, Ste 216		
		Address	
	North Miami, FL 33161		
		City/ State and Zip Code	e
info@	gapextrainingmiami.com		
	•	sed for future annual report	notification)
	,	·	
For further informatio	n concerning this matter, pleas	se call:	
Stephane W. Lherisso	on.	786	d63-2139 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Apex Training Center, Inc.	
(Name of Corporation	n as currently filed with the Florida Dept. of State)
P08000065845	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
N/A	The new
name must be distinguishable and contain the word "corp" Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word intion "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	N/A <u>************************************</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 new registered agent and/or the new registered of	ed office address in Florida, enter the name of the
Name of New Registered Agent N/A	
	(Florida street address)
New Registered Office Address:	, Florida
	am familiar with and accept the obligations of the position.
	ture 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 = ChiefExecutive 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: РŢ John Doe X Change Mike Jones \underline{V} X Remove \underline{SV} Sally Smith \underline{X} Add Address Title Type of Action Name

Check One)	11116	<u>rame</u>	
Change	V	Patricia Elias	12490 NE 7th Ave. Ste 216
Add			North Miami, FL 33161
X Remove			
			-
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. If amending or add (Attach additional sh N/A	ling additional . neets, if necessar	Articles, enter change(s) here: y). (Be specific)	

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provisions for implementing the amendment (if not applicable, indicate N/A) N/A	n not contained in the difference way.	
	<u> </u>	
	·	
	Page 3 of 4	
The date of each amendment(s) adoption:date this document was signed.		, if other than the
Effective date <u>if applicable</u> :		
Effective date <u>if applicable</u> :	o 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 not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	lopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	optoved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	···	
	(voting group)	
action was not required. The amendment(s) was/were a	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
action was not required. Dated 11/25/20	11 Kak 1	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Stephane W. Lherisson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	