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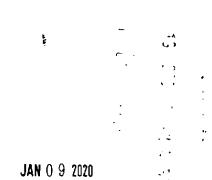
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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Welcome Assist . C	Corp.		
DOCUMENT NUM	P10000007931			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Renee Adwar, Esq.			
		Name of Contact Person	1	
	Renee Adwar, P.A.			
		Firm/ Company		
	848 Brickell Avenue Suite 90	00		
	Address			
	Miami, Florida 33131			
		City/ State and Zip Code		
rady	arpa@reneeadwarpa.com			
		sed for future annual report	notification)	
	., , , ,	,	,	
For further information	on concerning this matter, pleas	se call:		
Renee Adwar		at (374-4422	
Name of Contact Person		Area Co	de & Day time Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	irtment o '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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment to Articles of Incorporation of

Welcome Assist, Corp.			
(Name of Corporation as current	ly filed with the Florida Dept. of State	;)	
P10000007931			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the (following amendment(s	
A. If amending name, enter the new name of the corporation:			
		The new	
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must	breviation "Corp.," contain the word	
B. Enter new principal office address, if applicable:	11900 Biscayne Boulevard		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite 604		
	Miami, Florida 33181		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11900 Biscayne Boulevard		
	Suite 604		
	Miami, Florida 33181		
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address			
Name of New Registered Agent			
(Florida st	reet address)	······	
New Registered Office Address:	, Florida		
	a ing	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar		osition.	

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)

N/A

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.

X_Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
ype of Action Theck One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X Change	P	Carlos Fernandez	11900 Biscayne Boulevard
Add			Suite 604
Remove			Miami, Florida 33181
Change	V	Jason Schreier	11900 Biscayne Boulevard
Add			Suite 600
X Remove			Miami, Florida 33181
Change	<u>s</u>	Guillermo Meert	11900 Biscayne Boulevard
Add			Suite 600
X Remove			Miami, Florida 33181
Change	S	Francia Macias	11900 Biscayne Boulevard
X Add			Suite 604
Remove			Miami, Florida 33181
Change			
Add			
Remove			
Change			
Add			
Remove			
		Page 2 of 4	

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	PATE TO STATE	
		
provisions for implementing the amendme (if not applicable, indicate N A) N/A	ent if not contained in the amendment itself:	
	· · · · · · · · · · · · · · · · · · ·	
		<u></u>
	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>	
	Page 3 of 4	
		_
The date of each amendment(s) adoption: late this document was signed.		, if other than
ffective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(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 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 by the shareholders was/wer		The number of votes east for the amendment(s)
	• •	s through voting groups. The following statement d to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was	/were sufficient for approval
by	(voting group)	"
	(voting group)	
■ The amendment(s) was/were action was not required.	adopted by the board of direc	etors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators	without shareholder action and shareholder
Dated	11/25/19	
Signature	also	Jernanett
sele	•	officer – if directors or officers have not been in the hands of a receiver, trustee, or other court liary)
	(Typed or prin	Farrando 2 nted name of person signing)
	P. C. A.	test
	(Title of person signing)	