P10000043890

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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SECRETARY OF STATE

Amend

TF

JUN 25 2010

COVER LETTER

ŤO: Amendment Section Division of Corporations

NAME OF CORI	PORATION:	INTL INVESTMENTS I	NC
DOCUMENT NUMBER:		P10000043890	
The enclosed Artic	eles of Amendment and fee a	are submitted for filing.	
Please return all co	prrespondence concerning the	is matter to the following:	
		A ROSE MCGILLIVRAY	
	,	lame of Contact Person	
	INTL	INVESTMENTS INC	
		Firm/ Company	•
,	42	8 SAN MATEO DR.	
		Address	•
,		ALM SPRINGS, FL	
	C	ity/ State and Zip Code	
	HOTMAF E-mail address: (to be use	RKETS@AOL.COM d for future annual report notification)	
For further informa	ation concerning this matter,	please call:	
M	IARIO GIRARD	at (954) 2	242-2703
Name	of Contact Person	Area Code & Daytime Te	elephone Number
Enclosed is a check	k for the following amount n	nade payable to the Florida Depar	rtment of State:
	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 63	t Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	·le

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

ASTORITATION PA 1:00

INT'LINVESTMENTS INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000043890

(Document Number of Corporation (if known)

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		•	The i
ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or th ame must contain the word "chartered," "pr	ne designation "Corp," "Inc	," or "Co". A pr	incorporated" or ofessional corpora
8. Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>			
		;	
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			
			
new registered agent and/or the new reg		n Florida, enter th	e name of the
		n Florida, enter th	e name of the
			e name of the
new registered agent and/or the new reg	istered office address: (Florida street a	oddress)	orida
new registered agent and/or the new reg	istered office address:	nddress)	orida

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)

<u>Title</u>	Name	Address	Type of Action
CEO	MELINDA MCGILLIVRAY	428 SAN MATEO DR. PALM SPRINGS, FL 33461	_ ☑ Add _ □ Remove
Р	MARIO GIRARD	428 SAN MATEO DR. PALM SPRINGS, FL 33461	_ ☑ Add _ □ Remove
	ding or adding additional Articles, entereditional sheets, if necessary). (Be spe		
provisi	mendment provides for an exchange, reconst for implementing the amendment into applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: <u>6</u>	/17/10
Effective date <u>if applicable</u> :	6/22/10	(date of adoption is required)
	(no more than	90 days after amendment file date)
Adoption of Amendment(s)	(<u>C</u>]	HECK ONE)
The amendment(s) was/we by the shareholders was/w		e shareholders. The number of votes cast for the amendment(s) approval.
		the shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amer	ndment(s) was/were sufficient for approval
by	(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)	
action was not required.	, ,	e board of directors without shareholder action and shareholder e incorporators without shareholder action and shareholder
Dated_6/22 Signature	2/10 Mahala	MAM
(By	ected, by an inco	ident or other officer – if directors or officers have not been rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
	Mell	yped or printed name of person signing)
	<u></u>	E0
	(Title o	of person signing)