P10000065033

(Re	equestor's Name)	
· (Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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DIVISION OF CORPORATION

12 JUN -6 PM 1:58

Amend

JUN - 7 2012 T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	STRATEGIC	MINDS	INTERNATIONAL INC
DOCUMENT NUMBER:	P10000	065033	
The enclosed Articles of Amendm	ent and fee are submitt	ed for filing.	
Please return all correspondence c	oncerning this matter to	the following:	
,E-mail	NOPTH M	Firm/ Company LING AVI Address I AMI FI ity/ State and Zip	INTERNATIONAL INC = #355 23160 Code
For further information concerning	g this matter, please cal	l:	
JOSEPH DOMO Name of Contact P		at (95 Area	a Code & Daytime Telephone Number
Enclosed is a check for the follow	ing amount made payal	ole to the Florida l	Department of State:
, · · · · · · · · · · · · · · · · · · ·	ificate of Status (\$43.75 Filing Fee Certified Copy Additional copy is enclosed)	Certificate of Status
Mailing Addre Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Ar Di Cl	reet Address nendment Section vision of Corporations ifton Building 61 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



STRATEGIC MINDS INTE	ERNATIONAL INC. orida Dept. of State)	
(Name of Corporation as currently filed with the Fl	orida Dept. of State)	
P10000065033		
(Document Number of Corporation (if		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(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 "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	16500 COLYNS AVE #355	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	NORTH MIAMI FL 33160	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 611685	
·	NORTH MIAMI FL 33261	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		
Name of New Registered Agent		
16500 COU	INS AVE #355 per address)	
New Registered Office Address: NORTH MIAN (City)	, Florida 33160 (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	vith and accept the obligations of the position.	
Signature of New Registered A	gent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, n	iame, 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	PT	John D	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>SV</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change Add Remove				
2) Change Add Remove				
3) Change Add Remove				
4) Change Add Remove		-	***************************************	
5) Change Add Remove		_		
6) Change Add Remove				

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The date of each a	mendment(s) adoption: APRic 1, 2012
Effective date <u>if ap</u>	plicable: (no more than 90 days after amendment file date)
	(no more than 90 days after amenament fite date)
Adoption of Amen	dment(s) (CHECK ONE)
The amendment((s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) lers was/were sufficient for approval.
	(s) was/were approved by the shareholders through voting groups. The following statement ely provided for each voting group entitled to vote separately on the amendment(s):
"The numb	per of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(action was not re	(s) was/were adopted by the board of directors without shareholder action and shareholder equired.
The amendment(action was not re	(s) was/were adopted by the incorporators without shareholder action and shareholder equired.
D	nated May 31, 2012
S	(By a director, president or other officer – if directors or officers have not been solected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)