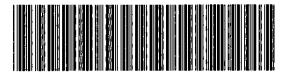
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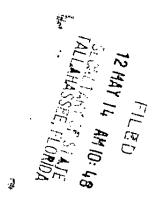
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COVER LETTER

TO: Amendment Section Division of Corporations

		CORPORATION	OF AMERICA
DOCUMENT NUMBE	R: P1100000181	7	
	Amendment and fee are su		
Please return all corresponder	ondence concerning this ma	tter to the following:	
٨	MICHAEL ANGE	LO	
_		Name of Contact Person	1
F	FLORIDA INCOF		
		Firm/ Company	
6	19 CATTLEME	N ROAD - SUITE	E O11
_		Address	
5	SARASOTA FL 3	34232 US	
	,	City/ State and Zip Cod	e .
ADM	IIN@FLORIDAII	CORPORATO	R.COM
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
MICHAEL AN	GELO	at (888	800-9573
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	urtment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	eg Address		Address
	Iment Section		ment Section
	on of Corporations ox 6327		n of Corporations Building
	assec, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FLORIDA CORPORATION OF AMERICA

D/ 1 0 0 1 11	STOCK OF A WILLIAM	
(Name of Co	orporation as currently filed with the Florida Dept. of State)	
0001817		

P11000001817	
(Document Number of Corporation (if I	(nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Foits Articles of Incorporation:	forida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation: FLORIDA INCORPORATOR CORPORAT	ON OF AMERICA The new
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 "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	72 12 H
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	HASSEE FLORIDA
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	<u> </u>
(Florida street	address)
New Registered Office Address: (City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.
Signature of New Pagistared Ag	ant if ahanaina

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)

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 <math>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 Jo	hn Doe			
X Remove	<u>v</u> <u>M</u>	ike Jones			
<u>X</u> Add	<u>SV</u> <u>S</u> a	ally Smith			
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s	
Change Add Remove			······································		
2) Change Add Remove					
3) Change Add Remove					
4) Change Add Remove					
5) Change Add Remove					
6) Change Add Remove					

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)	
provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
	ia.

The date of each amendment(s) a	doption: 01/01/2012
Effective date if applicable: 01	1/01/2012
in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated 01/01/	2012
Signature(By a d	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)
appoin	ted inductary by that inductary)
	REGIS BARROS
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)