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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: Burlington English Inc. DOCUMENT NUMBER: P11000022304			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Name of Contact Person Burlington English Inc. Firm/Company 1499 W. Palmetto Park Rd. #103 Address Boca Raton Florida 33486 City/ State and Zip Code Zevi. a & burlingtonenglish.com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Zey, Aber at (501) 672-7876 Name of Contact Person at (501) 672-7876 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:			
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to

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Articles of Incorp	poration	OCT 15 PI	W 0 .
		SECRETION	⁵ 2: 10
Burlington English Inc. (Name of Corporation as currently filed with the Flor	ida Dant of State	#ALLAHASSII E	STATE
	iua Dept. of State,	,	-UNIDA
P11000022304	>		•
(Document Number of Corporation (if ki	nown)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	orida Profit Corpor	ation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the corporation:			
			The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.A.	". A professional	incorporatea or the corporation name mus	aboreviation it contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			_
(Frincipal office address MOSI BE A STREET ADDRESS)			
	· · · · · ·		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
(Maining andress MATI BEAT OST OFFICE BOX)		···	
			_
D. If amending the registered agent and/or registered office address	in Florida ontar	tha nama of the	
new registered agent and/or the new registered office address:	o in Piolida, enter	the name of the	
Name of New Registered Agent			
nume of then registered rigem			
(Florida street	addrass)		
	uuur essy	_	
New Registered Office Address: (City)		Florida(Zip Code)	_
1011,7		(Zip Coue)	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent. I am familiar with	and accept the ob	igations of the position	1.
Signature of New Registered Age	nt, 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 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	<u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	/ Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove	D	Mark B. Cohen	13 Decoy Avenue London NW11 OES United Kingdom
2) Change Add Remove	<u> </u>	Chaim Zev Aber	22154 Verbena May Boca Raton, FL 33433
Change Add Remove	<u>D</u>	Chaim Zev Aber	22154 Verbena Way Boca Raton, FL 33433
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

(Attach additional sheets, if necessary). (Be specific)	
- No. 12.	
f an amendment provides for an exchange, reclassification, or cancel	ation of issued shares.
provisions for implementing the amendment if not contained in the a	mendment itself:
(if not applicable, indicate N/A)	
	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 10/15/2017 (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, 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)	
(Title of person signing)	
(Title of person signing)	