P11000024366

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BOR 5/16/12

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: JAD CONSULTING SERVICES INC. DOCUMENT NUMBER: P110000 24366 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BIATRIZ CORREA.

Name of Contact Person Firm/ Company 5843 SW 149 AVENUE Miami, FL 33193
City/ State and Zip Code bettymont1 @ Aol. com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Biatriz Correa at (786) 326-4131

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

is enclosed)

Articles of Amendment to

FILED

Articles of Incorporation

JAD CONSULTING SERVICES INC 2012 MAY 11 AM 11:51 (Name of Corporation as currently filed with the Florida Dept. of State) RE P11000024366 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) zistered office address in Florida, enter the name of the D. If amending the registered agent a tered office address: new registered agent and/or the n. IATRIZ CORREA Name of New Registered Agent <u>5843 SW149 AVENUE</u> (Florida street address) New Registered Office Address: New Registered Agent's Signature, if dhanging Registered Agent: I hereby accept the appointment as registered agent - I am familiar with and accept the obligations of the position.

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: XChange	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u> y	y Smith	
		•	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
Change Add Remove	P	Daniel Correa	5843 SW 149 AVE MIAMITEL 33193
2) Change Add Remove	Р	BIATRIZ CURECA	5843 JW 149 AVE MIAMI, FL 33193
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove	<u> </u>		
6) Change Add Remove			

If amending or adding add attach additional sheets, if i	necessary). (Be	specific)			
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If an amendment provides provisions for implement	for an exchange,	reclassification	ı, or cancellation	of issued shares	1
(if not applicable, indi	cate N/A)		tett in the amen	interit itseir.	
	<i>N</i>	/A	<u>, .,</u>		
		-		W	
1111-1111					77
	<u> </u>				
					

The date of each amendment(s) ac	doption: 5-8-12
Effective date if 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 su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient 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. The amendment(s) was/were addaction was not required.	opted by the incorporators without shareholder action and shareholder
Dated	8/12.
Signature (Date of	irector, president or other officer – if directors or officers have not been
	d, by an incorporator – if in the hands of a receiver, trustee, or other court
appoint	ted fiduciary by that fiduciary)
	Daniel Correa (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)