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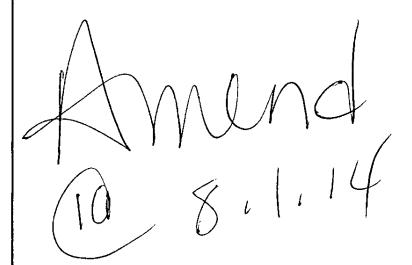
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: INVESTQ DOCUMENT NUMBER: P110000291		NERS INC				
The enclosed Articles of Amendment and fee are sul	omitted for filing.					
Please return all correspondence concerning this mat	ter to the following:					
ANAIS ARAGON						
INVESTQUES ⁻						
Firm/ Company 465 BRICKELL AVE #4103						
MIAMI, FL 33131						
* City/ State and Zip Code IQPMIAMI@GMAIL.COM						
	ed for future annual report	notification)				
For further information concerning this matter, please	e call:					
ANAIS ARAGON	_{at (} 305	746-8282				
Name of Contact Person		de & Daytime Telephone Number				
Enclosed is a check for the following amount made p	payable to the Florida Depa	irtment of State:				
■ \$35 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)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301				

Articles of Amendment to Articles of Incorporation of



INVESTQUEST PARTNERS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P11000029162 (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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address:

New Registered Agent's Signature, if changing 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 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	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	D		CHRISTOPHER A. RODRIG	465 BRICKELL AVE #4103
Add				MIAMI, FL 33131
Remove				
2) Change	T		GEORGE CANCIOBELLO	465 BRICKELL AVE #4103
Add				MIAMI, FL 33131
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

amending or adding additional Articles, enter change(s) here:	
ttach additional sheets, if necessary). (Be specific)	
•	
	
f an amendment provides for an exchange, reclassification, or cancellation of issued sl	napac
provisions for implementing the amendment if not contained in the amendment itself:	iai es.
(if not applicable, indicate N/A)	
(i) not applicable, marcale was	

The date of each amendment(s) adoption: 7/15/2014	, if other than the
date this document was signed.	
Effective date if applicable: 7/15/2014	
(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	
by" (voting group)	
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 7/15/2014	
(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)	
ANAIS ARAGON	
(Typed or printed name of person signing)	
VICE PRESIDENT	
(Title of person signing)	