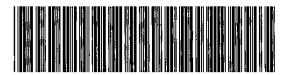
## P1100000466672

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(Address)				
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(C	City/State/Zip/Phone #)			
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: NEW SUPPLY A	ND DEMAND INTERNATIONAL
DOCUMENT NUMBER: P11000046672	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
JONATHAN WEARY	
	Name of Contact Person
NEW SUPPLY AND DEMA	AND INTERNATIONAL INC
	Firm/ Company
7776 NW 12 AVE	1 min Company
	Address
MIAMI FL 33150	
·=,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	City/ State and Zip Code
INTERNATIONALALLAROUNI	_
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	se call:
JONATHAN WEARY	at (305 ) 5020484  Area Code & Daytime Telephone Number
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	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  S52.50 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

NEW SUPPLY AND DEMAND INTERNATIONAL INC

oration (if known)  a Profit Corporation adopts the following amendment
oranion (ii kilowii)
a Profit Corporation adopts the following amendment
The new
ompany," or "incorporated" or the abbreviation A professional corporation name must contain the
401 W BROWARD BLVD #411
ANTATION FL 33324
401 W BROWARD BLVD #411
ANTATION FL 33324
Florida, enter the name of the
Press)
, Florida
(Zip Code)

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 us an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			-
Remove			
			<del> </del>
5) Change			
Add			
Remove			
6) Change			
Add	-		
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	_	
. , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		,-,-	
If an amendment provides for an exc	nange, reclassification, o	r cancellation of issued	shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained	in the amendment itse	<u>II:</u>

The date of each amendment(s) adoption:	) if other than th
date this document was signed.	, it office than the
APRIL 24 2015 Effective date if applicable:	
(no more	e than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's recommendation.	he applicable statutory filing requirements, this date will not be listed as the cords.
Adoption of Amendment(s) (CHECK ON	E)
☐ The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group ent	
"The number of votes cast for the amendment(s)	was/were sufficient for approval
by	
(voting group	)
☐ The amendment(s) was/were adopted by the board of d action was not required.	irectors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the incorporat	ors without shareholder action and shareholder
action was not required	
APRIL 24 2015	
Dated	<del>-//-</del> )
Signature molhal	(1) lear of
	her officer - il directors or officers have not been
	- if in the hands of a receiver strustee, or other court
appointed fiduciary by that fi	duciary)
<b>↓</b> JONATHAN WEAR	Y
(Typed or	printed name of person signing)
PRESIDENT / FOUN	IDER
<del></del>	(Title of person signing)