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SEURETARY OF STATE

T. LEWIEUX

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: EMS & EN	ERGY CONSUL	TING INC.	
DOCUMENT NUMBER: P1200005706	Ó		
The enclosed Articles of Amendment and fee are su			
Please return all correspondence concerning this may	tter to the following:		
Jeanette Hernand	dez-Suarez		
	Name of Contact Persor	ı	
Jeanette Hernand	dez-Suarez, P.A	·	
	Firm/ Company		
11400 N Kendall	Dr, Suite 205		
	Address		
Miami, Florida 33	176		
	City/ State and Zip Code	2	
hernandez205@yah	oo.com		
	sed for future annual report	notification)	
For further information concerning this matter, pleas	se call:		
Jeanette Hernandez-Suarez	at (305	, 596-1044	
Name of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	ertment 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)	
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

				01
FMS & F	ENERGY	CONSUL	TING INC	

(Name of Corporation as currently		la Dent. of State)		
P12000057060	med with the Florid	<u>,,, 20 j., 0, 0, 0, 0, 0, 0</u> ,		
(Document Number	of Corporation (if kno	own)		
Pursuant to the provisions of section 607,1006, Flor its Articles of Incorporation:	ida Statutes, this <i>Flor</i>	ida Profit Corporation	adopts the following	amendment(s) to
A. If amending name, enter the new name of the	corporation:			
	NIA			The new
name must be distinguishable and contain the war "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the base of the principal office address, if applicate the principal office address of the principal office	rp," "Inc." or "Co". he abbreviation "P.A. ple:	. A professional corp	proporated" or the absorption name must co	breviation ontain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E		N/A	SECRETARY TALLAHASSE	
D. If amending the registered agent and/or regis		in Florida, enter the i	name of the m	> [1]
new registered agent and/or the new registers				<u>,</u> •
Name of New Registered Agent Diana	Chacon-Mad	ceo	— 36 A	ა
1516	5 NW 88 Ct			
	(Florida street a	ddress)	_	
New Registered Office Address: Miam	i Lakes	. Flor	_{ida} 33018	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent Signature of			ions of the position.	

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 = Fice 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 Doe			
X Remove	<u>v</u>	Mike Jones			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	Р	Spencer Chacon	15165 NW 88 Ct		
Add			Miami Lakes, Fl 33018		
Remove					
2) Change	VP	Jorge Aguilar	1337 W 49 PI, Apt 506A		
Add			Hialeah, Fl 33012		
Remove					
3) Change	P	Diana Chacon-Maceo	15165 NW 88 Ct		
Add			Miami Lakes, Fl 33018		
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
. D					
6) Change					
L ∧dd Γ					
Remove					

ttach <i>additional</i>	dding addition sheets, if neces	ssary). (Be spec	cific)		
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an amendmeni	nrovides for s	n exchange rec	lassification of	cancellation of i	scued shares
rovisions for in	iplementing tl	<u>he amendment if</u>	not contained	in the amendmer	ıt itself:
уј погаррис	able, indicate	V(A)			
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		-			
				 	

The date of each amendment(s) adoption: May 29 , 2014	, if other than the
date this document was signed.	
Effective date if applicable: (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 May 29th, 2014. Signature & Claudy	
(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)	
Diana Chalon - Maceo (Typed or printed name of person signing)	_
Vice-President / President	