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TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: MCK Global Business Inc					
DOCUMENT NUMBER	R: P1200	0057968				
The enclosed Articles of	Amendment and fee are su	ibmitted for filing.				
Please return all correspon	ndence concerning this ma	atter to the following:				
	Haydee Goldiuk					
	Name of Contact Person					
	MCK Global Business Inc					
	Firm/ Company					
	5445 Collins Ave Suite #CU15					
	Address					
	Miami Beach, Florida, 33140					
		City/ State and Zip Cod	le .			
		pablociccarello@gmail	l.com			
	E-mail address: (to be us	sed for future annual report	notification)			
For further information co	ncerning this matter, pleas					
Name of Contact Person at ()de & Daytime Telephone Number				
Enclosed is a check for the	e following amount made	payable to the Florida Depo	artment 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

	MCK Global B			····
(Name of Corpo	ration as currently	filed with the Florida	Dept. of State	
	P1200005796			
(Do	cument Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this F	lorida Profit Corporat	ion adopts the f	ollowing amendment(s)
A. If amending name, enter the new name of th	e corporation:			
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	orp," "Inc," or "C	o". A professional co	corporated" or orporation name	The new the abbreviation must contain the
B. Enter new principal office address, if applica		5445 Collins Ave Suite #CU15		5
(Principal office address <u>MUST BE A STREET A</u>	IDDRESS)	Miami Beach, Florida, 33140		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i>)			
D. If amending the registered agent and/or reginew registered agent and/or the new register		es in Florida, enter th	e name of the	
Name of New Registered Agent				
· · · · · · · · · · · · · · · · · · ·	275 NE 18th ST			
	(Florida stree	t address)		
New Registered Office Address:	Miami		, Florida	33132
	(C	City)	•	(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	Registered Agent: t. I am familiar wi	th and accept the oblig	ations of the po	sition.
<u>- </u>	ignature of New Reg	sistered Agent, if chang		· ·

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	P	Haydee Goldiuk	5445 Collins Ave Suite #CU15
Add			Miami Beach, Florida, 33140
Remove			· · · · · · · · · · · · · · · · · · ·
2) Change			
Add		•	
Remove	•		
3) Change	·	·	•
Add	•		· .
Remove		•	
4) Change			
Add		•	
Remove		.*	
5) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
(f)Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			

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(if not applicable, indicate N/A)	hares.
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing a document's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. I must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for approv	val .
by	,, ,
(voting group)	
☑ The amendment(s) was/were adopted by the board of directors without shareholder a action was not required.	ction and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	and shareholder
Dated October 9th 2015	
Signature # Jale 4°	
(By a director, president or other officer – if directors or off selected, by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary)	
Haydee Goldiuk	<u></u>
(Typed or printed name of person signing	g)
President	
(Title of person signing)	