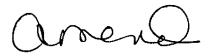
## P13000033626

(Re	equestor's Name)	
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

	RATION: SELF INTE BER: P1300003362		TUDY INC
	of Amendment and fee are su		
Please return all corre	spondence concerning this ma	tter to the following:	
	JUAN CHICOTTE	Ē	· 
	SELF INTERNAT	Name of Contact Person	
	8200 WEST 33 S	Firm/ Company ST SUITE 12	
	HIALEAH FLORI	Address DA 33018	
FE	RNANDEZSERVI E-mail address: (to be us	City/ State and Zip Cod CESCOMP@HO sed for future annual report	OTMAIL.COM
For further informatio	n concerning this matter, pleas	se call:	
JUAN CHICOTTE		at (305	3948020
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ame Div	iling Address endment Section ision of Corporations . Box 6327	Amend Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

FILED

## SELF INTERNATIONAL STUDY INC

2013 APR 23 PM 1:41

(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE TALLAHASSEE, FLOR P13000033626 (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: N/A 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: JUAN CHICOTTE Name of New Registered Agent 8200 WEST 33 ST SUITE 12 (Florida street address) Florida 33018 HIALEAH New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Nam 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 Doe	
X Remove	<u>V</u>	Mike Jones	
_ <u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	Р	EMMA CAMILLI	8200 WEST 33 ST SUITE 12
Add	<del></del>		HIALEAH FLORIDA 33018
X Remove			
2) Change	Ρ	JUAN CHICOTTE	8200 WEST 33 ST SUITE 12
X Add			HIALEAH FLORIDA 33018
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
•			
6) Change	-		
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  I/A	(Attach <i>additional si</i>	ing additional Articles, enter change(s) here: weets, if necessary). (Be specific)	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	/ <b>A</b>		
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(if not applicable, indicate N/A)	provisions for im	elementing the amendment if not contained in the amendment itself:	
/A			
	I/A		
			-

The date of each amendment	(s) adoption: 04/19/2013
Effective date <u>if applicable</u> :	04/19/2013
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d 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	(voting group)
,	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Signature(B se	y a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court epointed fiduciary by that fiduciary)
up	· · · · · · · · · · · · · · · · · · ·
	JUAN CHICOTTE
	(Typed or printed name of person signing)
•	PRESIDENT
	(Title of person signing)