P14000068772

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DIVISION OF CORPORATION

C.V.19,15

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: EFX INTE	ERNATIONAL	CORP			
DOCUMENT NUMBER: P14000068772					
The enclosed Articles of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this matter to the following:					
LUCIANA HER	RNANDEZ				
Name of Contact Person FLORIDA TAXES & ACCOUNTING SVC					
Firm/ Company 5137 N DIXIE HWY					
POMPANO BEACH, FL 33064					
City/ State and Zip Code LUFLORIDA@HOTMAIL.COM					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
LUCIANA HERNANDEZ	_{at (} 786	, 587-7927			
Name of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida Depa	rrtment of State:			
■ \$35 Filing Fee	□\$43.75 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	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301			

Articles of Amendment Articles of Incorporation of

15 FEB 18 PM 3: 32

EFX INTERNATIONAL CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

ent(s) to

P14000068772			
(Document Numb	er of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	lorida Statutes, this <i>Flori</i>	da Profit Corporation add	opts the following amendn
A. If amending name, enter the new name of the FX INTERNATIONAL CO		N	The ne
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Gword "chartered," "professional association," or	Corp," "Inc," or "Co".	A professional corporat	rated" or the abbreviation
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE			
D. If amending the registered agent and/or reg new registered agent and/or the new registe Name of New Registered Agent			e of the
Name by New Negaterea Agem			
	(Florida street aa	(dress)	
New Registered Office Address:	(City)	, Florida_	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		nd accept the obligations	of the position.
Ciamatana	of Vou Baristanad Arant	Wakanalaa	

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.

X Change	<u>PT</u>	John Do	2	
X Remove	<u>V</u>	Mike Jor	<u>ies</u>	
X Add	<u>SV</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	T		LUCIANA HERNANDEZ	5137 N DIXIE HWY
Add				POMPANO BCH, FL 33064
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
 1		_		
Add				
Remove				

	amending or adding additional Articles, entitach additional sheets, if necessary). (Be specially)	ecific)
		•
		The state of the s
		
_		
		And the second s
<u>If a</u>	an amendment provides for an exchange, re	classification, or cancellation of issued shares,
pr	rovisions for implementing the amendment (if not applicable, indicate N/A)	if not contained in the amendment itself:
	(η ποι αργαταίνε, παιτάτε τολ)	

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

15 FEB 18 PH 3: 32

The date of each amendment	(a) advantage 02/16/2015	, if other than the
date this document was signed	. (s) adoption:	, ii other than ti
Effective date if applicable:	02/16/2015	
interive date in apparation.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wes by the shareholders was/wes	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by		
·	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated <mark>02/1</mark> Signature	6/2015	
(E	By 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 popointed fiduciary by that fiduciary)	_
	PUBLIO DOS SANTOS JR	
	(Typed or printed name of person signing)	_
	PRESIDENT	_
	(Title of person signing)	