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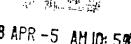
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TO: Amendment Section Division of Corporations

| NAME OF COR | PORATION: KAM K. ENTERP | RISES, INC. | | |
|---------------------|--|--|-----------------------------|--|
| DOCUMENT N | JMBER: P14000073447 | | | |
| | cles of Amendment and fee are su | bmitted for fili | ng. | |
| Please return all c | orrespondence concerning this ma | tter to the follo | wing: | |
| | NOUPANE KHAMNINH | | | |
| | | Name of C | ontact Person | 1 |
| | KAM K. ENTERPRISES, IN | IC. | | |
| | , | Firm/ (| Company | |
| | 3472 BLANCHETTE TRAIL | | Sompany | |
| | | Ad | dress | |
| | LAKE WORTH, FL. 33467 | | | |
| | | City/ State | and Zip Code | e |
| k | amkonaice@gmail.com | | | |
| | E-mail address: (to be us | sed for future a | nnual report | notification) |
| | | | • | , |
| For further inform | ation concerning this matter, pleas | se call: | | |
| NOUPANE KHA | MNINH | at i | 561 | de & Daytime Telephone Number |
| Na | me of Contact Person | | Area Co | de & Daytime Telephone Number |
| Enclosed is a chec | k for the following amount made | payable to the | Florida Depa | urtment of State: |
| S35 Filing Fee | e \$\frac{1}{2}\$\$43.75 Filing Fee & Certificate of Status | □\$43.75 Fi Certified (Additional enclosed) | Copy Il copy is | □\$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 | | Amend Divisio Clifton | Address Iment Section on of Corporations Building xecutive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



KAM K. ENTERPRISES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P14000073447 (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: 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am 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 | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) X Change | S | NOUPANE KHAMNINH | 3472 BLANCHETTE TRAIL |
| Add | | | LAKE WORTH, FL. 33467 |
| Remove | | | |
| 2) Change | S | DALI KHAMNINH | 3472 BLANCHETTE TRAIL |
| X Add | | | LAKE WORTH, FL. 33467 |
| Remove | | | |
| 3) Change | | | . |
| Add | | | |
| Remove | | | |
| 4) Change | | - | , |
| Add | | | |
| Remove | | | |
| 5) Change | | | * ************************************ |
| Add | | | |
| Remove | | | <u> </u> |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| \mathcal{N} | al sheets, if necessary). (Be spe | ecific) | | |
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| f an amendme | nt provides for an exchange, re | classification, or cance | llation of issued shares, | |
| provisions for | implementing the amendment i | classification, or cance f not contained in the | llation of issued shares, amendment itself: | |
| provisions for | implementing the amendment i licable, indicate N/A) | classification, or cance if not contained in the | llation of issued shares, amendment itself: | |
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| , 1 | 04/02/2018 | |
|--|---|--|
| The date of each amendment(s) ac | | , if other than the |
| date this document was signed. | | |
| | /2018 | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendmen | A Gla Jusa |
| | (no more than 90 days after amename) | nt file date) |
| Note: If the date inserted in this b document's effective date on the De | ock does not meet the applicable statutory filing reartment of State's records. | equirements, this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were ado by the shareholders was/were su | sted by the shareholders. The number of votes cast sticient for approval. | for the amendment(s) |
| | oved by the shareholders through voting groups. The each voting group entitled to vote separately on the | |
| | or the amendment(s) was/were sufficient for approv | al |
| by | (voting group) | ." |
| | (voting group) | |
| action was not required. | oted by the board of directors without shareholder action | |
| action was not required. | | |
| 04/02/2018 | | |
| Dated | | |
| Signature <u>Ma</u> | Hano Mil | |
| (By a di selected | ector, president or other officer – if directors or offi, by an incorporator – if in the hands of a receiver, to diduciary by that fiduciary) | |
| | NOUPANE KHAMNINH | |
| | (Typed or printed name of person signing | g) |
| | PRESIDENT | |
| | (Title of person signing) | |