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COVER LETTER

Division of Corporations NAME OF CORPORATION: Florida Polphin College Corp

DOCUMENT NUMBER: P140000 74129 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAMON do Jesus Hernandez
Name of Contact Person Florida Dol Phin College CORP.
Firm/Company 6923 NW 77th AUR Le Auxi FL 33166
City/State and Zip Code Ramon de Tesus home Hotma; 1. (com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RAMON De Tesus Herran Dez at (786), 448-2200

Manus of Contract Person

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filling Fee & □\$52.50 Filling Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

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

is enclosed)

Articles of Amendment to

Articles of Incorporation

of

Florian DolPHin College	CORP
(Name of Corporation as currently fit	led with the Florida Dept. of State)
P(40000 74159	
(Document Number of Co	rporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
r/a	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co' 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)	'. A professional corporation name must contain the
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent PA	
(Florida street a New Registered Office Address: (Florida street a	, Florida
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with	

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: <u>X</u> Change	PT John Dog	
X Remove	V Mike Jones	
X Add	SV Salty Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	V Jose A. Sautama	6923 NW 77 th AVE
<u>X_</u> Add		<u> Leidui FL-33166</u>
Remove		
2) (Thange	U IVAN GONZALOZ	6923 NW 77th AVR
<u>⊀</u> Add		Missui FL-33166
Remove 3) Change	T CARLOS R GONZAGO	6923 NW 77+1 /U.
<u></u> Add		Lei Aui FL-37166
Remove		
4) Change		
Add		
Remove		
57 Change		
Add		
Remove		
δ) 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)	
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
P/A	
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	-

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this da document's effective date on the Department of State's records.	te 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 east for the amendment(s by the shareholders was/were sufficient for approval.	9
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
 The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder 	1
action was not required.	
Dated07/18/2018	
Signature(By a director, president or other officer \ if hirectors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other cour	I.
appointed fiduciary by that fiduciary)	
Ramon de Jesus Hernandez	
(Typed or printed name of person signing)	
Para	
- / KESTOENT	
(Title of person signing)	