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SECRETARIA

THE DAILSSEE, FLORIDA

DEC 24 2014

...R.WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ONE STRII	NGS ACADEMY	USA CORP
	ER: P1400008283		
	f Amendment and fee are su		
Please return all corresp	oondence concerning this ma	tter to the following:	
	MARKETA JILKO	OVA	
		Name of Contact Person	1
-		Firm/ Company	
:	21194 SHADY V	ISTA LANE	
BOCA RATON, FL 33428			
-		City/ State and Zip Code	e
	E-mail address: (to be us	sed for future annual report	notification)
PIERRE H DUMAS		at (561	870-3489
Name of	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	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)
Amer Divis P.O.	ing Address ndment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Bassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 14 DEC 22 PM 3: 24

ONE STRING ACADEMY USA CORP

JALLAHASSEE FLORIDA

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

P14000082836	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 ad	Idress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	. Florida
(Ci	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	
	sum man party and doubt and specific and party a

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 <math>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>	<u>Name</u>	<u>Addres</u> s
1) Change		MARKETA JILKOVA	21194 Shady Vista Lane
✓ ∧dd			BOCA RATON, FL 33428
Remove			
2) Change			_
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ticles, enter change(s) here: (Be specific)	
· · · · · · · · · · · · · · · · · · ·		

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	h	
ovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

The date of each amendment date this document was signed	t(s) adoption: 10/20/2014	, if other than the
Effective date if applicable:	10/20/2014	
<u></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.	
	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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_10/1	18/2014	
Signature	ATE 1)	
sc	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 oppointed fiduciary by that fiduciary)	
	PIERRE H DUMAS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	_