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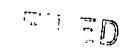
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: HJ FLORIDA INC			
DOCUMENT NUM	P15000004333		Leave grant	
The enclosed Articles	s of Amendment and fee are st	ibmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	JAVIER E. KRAUSSE			
		Name of Contact Pe	rson	
	HJ FLORIDA INC			
	-	Firm/ Company		
	6225 NW 125 AVENUE	That Company		
		Address		
	CORAL SPRINGS, FL 3307	6		
		City/ State and Zip C	Inde	
JKR	AUSSE@GMAIL.COM			
	E-mail address; (to be u	sed for future annual ren	port notification)	
For further information	on concerning this matter, pleas	se call:		
JAVIER E KRAUSS	F	95.1	853-2924	
	of Contact Person	at (954	Code & Daytime Telephone Number	
Name	of Contact Person	Area	Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida D	Department of State:	
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status	
Mailing Address			eet Address	
	endment Section		endment Section	
	rision of Corporations		rision of Corporations	
), Box 6327 Jahassee, EL 30314		fton Building J. Executive Center Circle	
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



HJ FLORIDA INC

2019 AUG 23 PM 3:

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P15000004333	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	rporation:
	The new
	l "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDR</u>	<u>RESS</u>)
	.
Enter new mailing address, if applicable:	v.
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	
). If amending the registered agent and/or registered	ed office address in Florida, enter the name of the
new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
Sew Registered Agent's Signature, if changing Regis hereby accept the appointment as registered agent. I	stered Agent: I am familiar with and accept the obligations of the position.
Signat	tture 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, an 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:

 $P = President; V \neq Vice President; T = Treasurer; S = Secretary; D = Director; TR \neq Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offiched, President, Treasurer, Director would be PTD.$

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> <u>John</u>	ı Doc	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	KRAUSSE, JAVIER E	6225 NW 125 AVENUE
Add			CORAL SPRINGS, FL 33076
X Remove			
2) Change	VP	STRUBE, VALERIA V	6225 NW 125 AVENUE
Add			CORAL SPRINGS, FL 33076
X Remove			-
3) Change	D	KRAUSSE, MARTIN	6225 NW 125 AVENUE
Add			CORAL SPRINGS, FL 33076
X Remove			
4) Change	AMBR	KSK GROUP HOLDINGS LLC	6225 NW 125 AVENUE
X Add			CORAL SPRINGS, FL 33076
Remove			
5) Change			
Add			, <u> </u>
Remove			
6) Change			
Add			
Remove			

	adding additional Ar al sheets, if necessary).	(Be specific)			
					
					
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an amendme	nt provides for an exc	hange, reclassificati	on, or cancellation	of issued shares,	
	implementing the am		ained in the amend	ment itself:	
e.c	licable, indicate N/A)				
(if not app					
(if not app					
(if not app					
(if not apţ				,,,	
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			***************************************	,	
				,	
(if not app					

The date of each amendment(s) adoption:	, if other than th
Effective date if applicable:	
(no more than 90 days after amenda	nent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes caby the shareholders was/were sufficient for approval.	ist for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on t	
"The number of votes cast for the amendment(s) was/were sufficient for appr	roval
by	··
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	r action and shareholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action was not required.	on and shareholder
Dated	
Signature	
(By a director, president or other officer – if directors or selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)	
JAVIER E KRAVSSE	
(Typed or printed name of person sign	ing)
PRESIDENT	
(Title of person signing)	