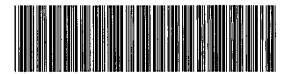
P15000054591

(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: TETUM INC P15000054591 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: EMILENKO REDONDO Name of Contact Person **EMILENKO** Firm/ Company Address 2075 SW 122 AVE 519 MIAMI, FL 33175 City/ State and Zip Code INFO@ACCOUNTING2EASY.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: EMILENKO REDONDO Name of Contact 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** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of

FILED

TETUMING			anik arp	24 PM 2:45	
(Name of Corporation as	s currently filed with the Flo	rida Dept	of State	S = CITATE	_
P15000054591			SECHETA TALL SHA	GIT OF STATE SSEE, FLORIDA	ı. La
(Document	nt Number of Corporation (if	known)	70	ni .	-
Pursuant to the provisions of section 607. ts Articles of Incorporation:	.1006, Florida Statutes, this F	lo rida Pr oj	fit Corporation a	dopts the followin	ig amendment(s)
. If amending name, enter the new na	ame of the corporation:				
TETUM INVESTMENT II	NC				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	o". A pro			
3. Enter new principal office address,	if annlicable	N/A			
Principal office address MUST BE A S					-
					-
					_
Enter new mailing address, if applicable:		N/A			
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u>)		 		_
					_
					_
D. If amending the registered agent an	nd/or registered office addre	<u>ss in Flori</u> e	da, enter the nai	me of the	
new registered agent and/or the new					
Name of New Registered Agent	N/A			_	
				<u>-</u>	
	(Florida stree	t address)			
New Registered Office Address:	N/A		, Florida		_
	(City)			(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:				
hereby accept the appointment as regist		th and acc	ept the obligation	s of the position.	
	anature of New Registered Ac	ant if abou	naina	-	

lf amending th	e Officers and/or Directors,	enter the title and	name of each o	officer/director be	ing removed and title	, name, and
	officer and/or Director be				J	

(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:	e, una sa	uy smun, sv as an Aaa.	
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) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			*
5) Change			
Add			
Remove			
6) Change			
Add			
[]			
Remove			

(Attach additional sheets, if necessary).	(Be specific)
/A	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
/A	

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
· ·	N/A	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder	·
	09/22/2015	
Dated/ Signature		
	rector, president or other officer - if directors or officers have not been	· ······
	, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
-	(Typed or printed name of person signing)	
-	PRESIDENT	·
	(Title of person signing)	