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COVER LETTER

Division of Corporations I-DRA, CORP NAME OF CORPORATION: _ P16000016102 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ROSA REYES Name of Contact Person 1-DRA, CORP Firm/ Company 1317 HARBOUR SIDE DR Address WESTON, FL 33326 City/ State and Zip Code INFO@I-DRA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ROSA REYES at (954) 235-6025

Area Code & Daytime Telephone Number Name of Contact Person 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

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

Articles of Amendment to Articles of Incorporation of

I-DRA, CORP			
(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
P16000016102			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the f	ollowing amendn	nent(s) t
A. If amending name, enter the new name of the corporation:			
		The ne	
name must be distinguishable and contain the word "corporat, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name	the abbreviation	on
B. Enter new principal office address, if applicable:	ROGER REYES		
(Principal office address MUST BE A STREET ADDRESS)	1317 HARBOUR SIDE DR		•
	WESTON, FL 33326		•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		17	•
<u></u>		:	-1
		10	
		• • • • • • • • • • • • • • • • • • • •	: II
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre			رد. ۱
new registered agent and/or the new registered office addre	<u></u>	<u> </u>	
Name of New Registered Agent			
(Florida s	treet address)		
New Registered Office Address:	, Florida		
New Registered Office Address.	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian		itian	
петелу иссерстве арролитет аз гезімегей адет. Тат јашна	with that accept the ornigations of the po.	ушот.	
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>Y</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) X Change	<u>V</u>	ROSA REYES	1317 HARBOUR SIDE DR
Add			WESTON, FL 33326
Remove			
2) Change	1'	ROGER REYES	E317 HARBOUR SIDE DR
X Add			WESTON, FL 33326
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			***
Remove			
5) Change			
Add			-
Remove			
6) Change		·	
Add			
Remove			

	. (Be specific)
.	
	 _
_	
If an amendment provides for an excl	change, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
ar not applicable indicate N/A)	RE TO THE FOLLOWING:
(if not applicable, indicate N/A) E ARE RECLASSIFYING THE SHAR	
E ARE RECLASSIFYING THE SHAR	
E ARE RECLASSIFYING THE SHAR ROGER REYES = 51 %	
E ARE RECLASSIFYING THE SHAR ROGER REYES = 51 %	
E ARE RECLASSIFYING THE SHAR ROGER REYES = 51 %	
E ARE RECLASSIFYING THE SHAR ROGER REYES = 51 %	
E ARE RECLASSIFYING THE SHAR ROGER REYES = 51 %	
(if not applicable, indicate N/A) E ARE RECLASSIFYING THE SHAR ROGER REYES = 51 % ROSA REYES = 49 %	

	7/17/2017	
The date of each amendment		, if other than the
date this document was signed		
Effective date if applicable:	7/17/2017	
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this dat be Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.)
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	И
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
7/17/3 Dated	017	
Signature C	E munificare	
(B	y a director/presidence other orlicer – if directors or officers have not been	
se	lected, by an incorporator – if in the hands of a receiver, trustee, or other court	
ар	pointed fiduciary by that fiduciary)	
	ROSA REYES	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	