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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: JULESH CORP			
DOCUMENT NUMB				
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	JULIETA RENTERIA			
		Name of Contact Person	n	
	JULESH CORP			
		Firm/ Company		
	9881 SUNRISE LAKES BL	VD, #311		
		Address		
	SUNRISE, FL 33322			
		City/ State and Zip Cod	<u> </u>	
JULY	H@HOTMAIL.COM			
	E-mail address; (to be u	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
JULIETA RENTERIA		954 at (	496-2714	
Name (	of Contact Person	at ( ) 496-2714  Area Code & Daytime Telephone Num		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
Mailing Address		Street	Address	
Ame	ndment Section	Amene	Iment Section	
	sion of Corporations	Division of Corporations		
P.O. Box 6327 Tallabassee, FL 32314		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

JULESH CORP

(Name of Corporation as currently f	led with the Florida Dept. of State)	
P16000035606		
(Document Number of Co	orporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this $Fh$ its Articles of Incorporation.	rida Profit Corporation adopts the fo	dlowing amendment(s)
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.2"	". A professional corporation name	
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 address	in Florida, enter the name of the	T 13
new registered agent and/or the new registered office address:		上 2 日
Name of New Registered Agent		2:
(Florida street	address)	<del></del>
New Registered Office Address:	, Florida	
(C)		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the po.	sition,
Signature of New Reg.	stered 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: <u>X</u> Change	<u>6.1.</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	RAUL E. HOYOS	9881 SUNRISE LAKES BLVD #3
Add			SUNRISE, FL 33322
X 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).	ticles, enter change . (Be specific)			
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f an amendment provides for an exc	change, reclassificat	tion, or cancellatio	n of issued shares	
provisions for implementing the am	endment if not con	tained in the amen	dment itself:	<u>.</u>
(if not applicable, indicate N/A)				
			<u></u>	
	<del>.</del>	<u></u>		

	09/14/2017	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
	9/14/2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date wi Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
09/14/20	017	
Dated Signature	Juliata Ranteria	
sele	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	JULIETA RENTERIA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	