P160000041829

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: INTEMAR GROU	JP CORPORATION		
DOCUMENT NUM	BER: P16000041829			
	s of Amendment and fee are si	ibmitted for filing.		
Please return all corre	espondence concerning this ma	itter to the following:		
	JUAN PABLO NIELSEN PO	DBLETE		
		Name of Contact Perso	n	
	INTEMAR GROUP CORPO	PRATION		
		Firm/ Company		
	520 CLIFTON STREET UN	•		
		Address		
	ORLANDO, FL 32808	,		
		City/ State and Zip Cod	e	
ACC	OUNTANT@TAXZONEFL.	COM		
	• •	sed for future annual report	notification)	
For further informatic	on concerning this matter, plea	se call:at (516-0653	
Name of Contact Person		at (Area Co) de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made		·	
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			Address	
	iendment Section	Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		
·		Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of



INTEMAR GROUP CORPORATION

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

P16000041829

(Document Number of Corporation (il known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

its Articles of incorporation:		
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the wa "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or the	rp," "Inc," or "Co" A professional	
B. Enter new principal office address, if applical (Principal office address <u>MUST BE A STREET AI</u>	ODRESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u></u>	
D. If amending the registered agent and/or regist new registered agent and/or the new registere		the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address;	(City)	, Florida

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Juan P. Pielsen Poblet.

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:

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

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

X Change	<u>PT</u>	<u>John Doc</u>	
X Remove	$\overline{\lambda}$	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Tule	<u>Name</u>	<u>Addres</u> s
I) Change	J'	JUAN PABLO NIELSEN POBLETF	520 CLIFTON STREET UNIT #5
Add			ORLANDO, FL 32808
X Remove			
2) Change	VP	JUAN CARLOS NIELSEN STAMBI	520 CLIFTON STREET UNIT #5
Add			ORLANDO, FL 32808
X Remove			
3) Change	()	JC NIELSEN & SON LLC	520 CLIFTON STREET UNIT #5
X Add			ORLANDO, FL 32808
Remove			
4) Change		<u> </u>	
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, i	A 30. 10. 40. 40. 41. 11. 1	Alexander History	<u>((s) here</u> :		
	[necessary) = 1	Be specific)			
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If an amendment provide	es for an exchan	ge, reclassificat	tion, or cancellati	on of issued share	28,
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* · · · · · · ·	06-02-2017	
The date of each amendment(s) a date this document was signed.	doption:	
)2-2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	9
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amorticient for approval.	endment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
The amendment(s) was were ad action was not required.	opted by the board of directors without shareholder action and s	hareholder
☐ The amendment(s) was were ad action was not required.	opted by the incorporators without shareholder action and share	holder
06-02-201 Dated Signature	Lyan P. Dielsen Toblete.	
(By a c selecte	irector, president or other officer - if directors or officers have d, by an incorporator - if in the hands of a receiver, trustee, or ofted fiduciary by that fiduciary)	
	JUAN PABLO NIELSEN POBLETE	
	(Typed or printed name of person signing)	
	REGISTERED AGENT	
	(Title of person signing)	