P1600088317

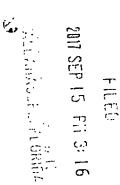
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C. GOLDEN SEP 1 8 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: National Develop	ment Investment
DOCUMENT NUMBER: P16000088217	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Yelitza Lujan/Kristen	
	Name of Contact Person
0727 NIW AL 11 St. 11 MACA	Firm/ Company
9737 NW 41st Street #464	
Doral, Florida 33178	Address
	City/ State and Zip Code
yelitza.lujan18@gmail.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, plea	ase call:
Yeltza Lujan/Kristen	at 321,948 2052.
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status	Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address 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

Articles of Amendment to Articles of Incorporation of

FILED

2017 SEP 15 PH 3: 17

NATIONAL DEVELOPMENT INVESTMENT INC.

	!!		
(Name of Co	proporation as currently	filed with the Florida Der	ot. of State). 14 10 Early MASTER, FLORIU
	P16000088217		In Electrical Later COMM
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	5, Florida Statutes, this F	lorida Profit Corporation a	adopts the following amendment(s) to
A. If amending name, enter the new name.	of the corporation:		
N/A			The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association, B. Enter new principal office address, if ap	n "Corp," "Inc," or "C " or the abbreviation "F	o". A professional corpor	
(Principal office address <u>MUST BE A STRE</u>	ET ADDRESS)		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF	FICE BOX)	N/A	
If amending the registered agent and/or new registered agent and/or the new reg		ss in Florida, enter the na	me of the
Name of New Registered Agent N/A	li .		
	(Florida stree	es address)	
	Triorida Sire	.1 (164) (33)	
New Registered Office Address:			_, Florida
		City)	(Zip Code)
New Registered Agent's Signature, if chang	 ging Registered Agent:		
I hereby accept the appointment as registered	l agent. I am familiar w	ith and accept the obligatio	ns of the position.
	Signature of New Re	gistered Agent, if changing	 _

			ie and name of each offic	rer/director being removed and title, dame, and
address of each Officer				
(Attach additional sheets,				
Please note the officer/dir	rector tit	le by the first letter of the	office title:	
P = President; V = Vice I	Presiden	t; T= Treasurer; S= Sec.	retary; D= Director; TR=	= Trustee; C = Chairman or Clerk; CEO = Chief
			officer/director holds mo	re than one title, list the first letter of each office
held. President, Treasure	r, Direct	or would be PTD.		
Changes should be noted	in the fo	llowing manner. Curren	itly John Doe is listed as t	he PST and Mike Jones is listed as the V. There is
			is named the V and S. The	se should be noted as John Doe, PT as a Change,
Mike Jones, V as Remove.	, and Sa	lly Smith, SV as an Add.		
Example:				
X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>\$V</u>	Sally Smith		
Type of Action	<u>Title</u>	 <u>Name</u>		<u>Addres</u> s
(Check One)				
1) Change	<u>v</u>	Yelitza Lujan —	/Kristan	9737 NW 41st Street #464
Add				Doral, Florida 33178
X				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_	<u></u>	
Add				
Remove				
		İ		
5) Change		_	·-·-	
Add				
Remove				
δ) Change		_		
Add				

___ Remove

E. If amending or adding additional Articles	s, enter change(s) here:
(Attach additional sheets, if necessary). (E	Be specific)
N/A	
	11
	II
	<u> </u>
F. If an amendment provides for an exchange	ge, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	nent if not contained in the amendment itself:
N/A	
· · · · · · · · · · · · · · · · · · ·	

· · ·		
The date of each amendment(s) adoption: date this document was signed.		, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does a document's effective date on the Department of	 not meet the applicable statutory filing requirements, this date will not state's records.	ot be listed as the
Adoption of Amendment(s) (CF	IECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s)	
"The number of votes cast for the ame	 ndment(s) was/were sufficient for approval 	
by	.,	
(vo	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
8/07/2017		
Dated	Pujan	_
(By a director, pre-	sident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court	
•	y by that fiduciary)	
Yelitza Lij	an/Kristan	
	(Typed or printed name of person signing)	
Vice Presi	 dent 	
	(Title of person signing)	