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924-007-8 KHH: 36

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Project Manageme	nt Ambassador Inc		
DOCUMENT NUMB	ER: P16000091068			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
		Maria Lopez		
-		Name of Contact Persor	1	
	Pr	oject Management Ambass	ador Inc	
-	······································	Firm/ Company		
	16	000 PINES BLVD #825022	2	
_		Address	· - ·	
_		PEMBROKE PINES, FL	33082	
_		City/ State and Zip Code		
		il.com		
_	E-mail address: (to be us	sed for future annual report	notification)	
	concerning this matter, pleas		224 2272	
Maria Lopez		at (_) 224-3270	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

2024 001 -8 AMM: 36

PROJECT MANAGEMENT AMBASSADOR INC.

(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s its Articles of Incorporation: A. If amending name, enter the new name of the corporation: PHD4themind Corp The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A	(Name	of Corporation as currently	y filed with the Florida Dept. of State)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s its Articles of Incorporation: A. If amending name, enter the new name of the corporation: PHD4themind Corp The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:		P1600009	21068	
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name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: N/A	PHD4themind Corp			TL
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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 new registered agent and/or the new registered office address:			N/A	
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D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:				
new registered agent and/or the new registered office address:			N/A	
new registered agent and/or the new registered office address:				
new registered agent and/or the new registered office address:	D. If amounding the assistance areas	-d/		
Name of New Registered Agent				
	Name of New Registered Agent	N/A		
(Florida street address)		(Florida stre	et address)	
New Registered Office Address: N/A . Florida	New Registered Office Address:	N/A	Florida	
(City) (Zip Code)	new meganera complete man egg.			ode)
New Begigtened Agent's Signature of the signature Decision of the signature of the signatur	Now Designated Agentla Cianatura II.	bassing Desirent to a		
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 position.	I hereby accept the appointment as regis	tered agent. I am familiar w	ith and accept the obligations of the position.	
N/A		N/A		
Signature of New Registered Agent, if changing		Signature of New Re	gistered Agent, if changing	
Check if applicable	Check if applicable	•		

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Do	<u>oe</u>	
X Remove	Y	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
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		_		
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6) Change	_	_		
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	ssary). (Be specific)			
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an amendment provides for a	n exchange, reclassific	ation, or cancellation	of issued shares,	
provisions for implementing the (if not applicable, indicate it	ne amendment if not co	ntained in the amend	ment itself:	
(ij noi applicable, inalcale l	VA)			
NIA				
			_	
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			<u>-</u>	

The date of each amendment(s) adoption:	N/A	, if other than the
date this document was signed.		
Effective date if applicable:	N/A	
enecure date <u>ir applicable</u> .	(no more than 90 d	ays after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	e incorporators, or boa	rd of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The nur approval.	imber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by t must be separately provided for each votin	the shareholders throug	h voting groups. The following statement e separately on the amendment(s):
"The number of votes cast for the am	endment(s) was/were s	ufficient for approval
by		17
	oting group)	 -
10/3/2024		
Dated	-	<u> </u>
Signature	MAX	
(By a director, pre	sident or other officer -	- if directors or officers have not been
selected, by an inc appointed fiducia	corporator – if in the ha ry by that fiduciary)	ands of a receiver, trustee, or other court
	Maria Lopez	
	(Typed or printed nam	ne of person signing)
	CEO	
	(Title of person signin	g)