017000000325

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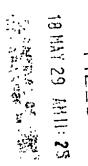


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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: INTELLIGENT M	ARKETING SERVICES I	NC
DOCUMENT NUMI	BER: P17000000325		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Luis Amorosi		
		Name of Contact Person	n
	Intelligent Marketing Service	s Inc.	
		Firm/ Company	
	2901 W Cypress Creek Rd. S	uite 115	
	· · · · · · · · · · · · · · · · · · ·	Address	
	Fort Lauderdale, FL 33309		
		City/ State and Zip Cod	С
luis :	imorosi@live.com		1
		sed for future annual report	•
	·	•	•
For further information	n concerning this matter, pleas	se call:	
Luis Amorosi		954 at (562-8190
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r 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)
Ame Divi P.O.	cling Address endment Section dision of Corporations disposed Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

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	211110201110		
(Name o	f Corporation as curre	ently filed with the Florida Dept. o	f State)
P17000000325			
	(Document Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, t	his <i>Florida Profit Corporation</i> adop	ots the following amendment(s)
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," o	r "Co". A professional corporation	
B. Enter new principal office address,	if applicable:	2901 W Cypress Creek Rd. S	uite 115
(Principal office address MUST BE A S		Fort Lauderdale, FL 33309	
C. Enter new mailing address, if applia (Mailing address MAY BE A POST of address MAY BE A POST of a mailing address of a mailing address of a mailing address of a mailing address of a mailing address, if applia (Mailing address)).	<u>OFFICE BOX</u>) d/or registered office a		29 AH
Name of New Registered Agent	Luis Amorosi		·
Name of New Registered Agent	2901 W Cypress Creek	Rd. Suite 115	
		street address)	
New Registered Office Address:	Fort Lauderdale	,	33309 lorida
		(City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	ered agent. 1 am/amili	ar with and accept the obligations o	f the position.
	Signature of Ne	w 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.

X Change	<u>PT</u> <u>Jo</u>	hn Doc	
X Remove	<u>V</u> <u>M</u>	ike Jones	
_X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	ELIZABETH ZAMORA	5346 NE 6TH AVE #10A
Add			FORT LAUDERDALE, FL
x Remove			33334
2) Change	P	RAFAEL VIANA	5352 NE 6TH AVE #10A
X Add			FORT LAUDERDALE, FL
Remove			33334
3) Change	VP	LUIS AMOROSI	22220 Collington Drive
X Add			Boca Raton FL 33428
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
1 1 17	
· · · · · · · · · · · · · · · · · · ·	
f an amandmant provides for an eych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	02/28/2018	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	2/28/2018	
Effective date if applicable:		
	(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 e Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendmen sufficient for approval.	t(s)
	approved by the shareholders through voting groups. The following states for each voting group entitled to vote separately on the amendment(s):	nent
	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 sharehol	der
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	5/22/18	
Signature		
	a director, president or other officer - if directors or officers have not bee	n
sele	cted, by an incorporator - if in the hands of a receiver, trustee, or other co	urt
арро	pinted fiduciary by that fiduciary)	
	LUIS AMOROSI	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	

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