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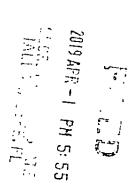
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R. WHITE APR 1 0 2019



COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporation	ons		
NAME OF CORPORAT	0:70	e College Co	onsulting Co. INC
The enclosed Articles of A	mendment and fee are su	bmitted for filing.	
Please return all correspon	dence concerning this ma	tter to the following:	
	Mara F Creane 1276 Ro Frodo E-mail address: (to be us	Name of Contact Person COLUCE Firm/ Company Address City/ State and Zip Code sed for future annual report	Consulting (o. Inc BIVI).
For further information con	ncerning this matter, pleas	se call:	
Marie of Co	ontact Person	at (5\Q 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)
<u>Mailing</u>	Address	Street	Address

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of	Amendment
	to
	Incorporation of
One 2 one College Co	MI 18 (2003) DOILLEAN
(Name of Corporation as curren	ntly filed with the Florida Dept. of State) 117 5: 55
	30.75
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
	HEAL GENERAL EQUIPMENT SHAPE TO THE Shreviation
	EARLIE O OLI
B. Enter new principal office address, if applicable:	17776 BMA Club BIVA.
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	1,100
	#1800
	BYCA LATON H. 33197
C. C. A	,
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 ac	
new registered agent and/or the new registered office addre	ess:
Name of New Registered Agent	
(Florida	street address)
(Filmal	street dadress)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	marza 1
Thereby accept the appointment as registered agent. I am familia	
т петеод ассерт те арропитет ах геумегей адет. Т ат јатина	и жин ана ассері іне отіханть ој те рохион.

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 = 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 Doe		
X Remove	<u>v</u>	Mike Jone	<u>25</u>	
_X Add	<u>sv</u>	Sally Smit	<u>th</u>	
Type of Action (Check One)	<u>Title</u>	<u> </u>	<u>Vame</u>	<u>Addres</u> s
1) Change				
Add				
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).	(Be specific)		
		<u></u>	
		-	
	<u> </u>		
			
-			
			
		<u></u>	
an amendment provides for an excl	ange, reclassification, or cancellati	ion of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	ngment if not contained in the ame	mament usen:	
(9			
		<u></u>	
			

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: Maych 33, 2019	
(no more than 90 days after amendment file date)	· <u>·</u>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
bv''	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated Signature AND Signature	
(By a director, president or other officer if directors or officers have not been	
selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Mara Path	
(Typed or printed name of person signing)	
CEO/ FOUNDER	·
(Title of person signing)	