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COVER LETTER

TO: Amendment Section Division of Corporations	7
NAME OF CORPORATION: MINES INTERCONTROPAL CORP.	
DOCUMENT NUMBER: 7 170000 10 116	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
MIGOEL A. JELBCO NESI.	
Name of Contact Person	
7635 NW 115 TH CT.	
MEDLEY, FLORIDA 33178.	
City/ State and Zip Code MUES INTERNATIONAL OGMAIL COM- E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
MGVEL A JELISCO NESTAL 786, 304 05 16. Name of Contact Person Area Code & Daytime Telephone Number	-
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) \$\Bigcup \\$43.75 Filing Fee & Certificate of Status (Additional Copy is enclosed)	
Mailing Address Amendment Section Amendment Section	
Division of Corporations Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment to

Articles of Incorporation fi<u>led with</u> the Florida De<u>pt, of Sta</u>te) (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) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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) 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: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida

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.

Signature of New Registered Agent, if changing

Addi (Atto Plea P = Exec held Char a ch Mike	ress of each Officer ach additional sheets se note the officer/di President; V= Vice outive Officer; CFO. President, Treasurenges should be noted ange, Mike Jones led Jones, V as Remove	and/or I. i, if neces. irector tit. Presiden = Chief er, Direct I in the fo	le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Director: TR= Tri Financial Officer. If an officer/director holds more th	ustee; C = Chairman or Clerk; CEO = Chief ian one title, list the first letter of each office ST and Mike Jones is listed as the V. There is
	mple: Change	PT	John Doe	
<u>X</u> F	Remove	<u>V</u>	Mike Jones	
<u>X</u>	Add	<u>sv</u>	Sally Smith	
-	eck One)	<u>Title</u>	Name (<u>Addres</u> s
	Change	V	VEINSCO VESTALIA	7635 NW 115TH
_	Add			CT, MEDLEY Florida
4	X Remove			3317B.
2) _	Change	V	Vestalia Aranoso	7635 NW 115TH.
	X Add			CT, MEDLEY FLURIDA
. –	Remove			33116
3)	Change			
_	Add			
-	Remove			
4) _	Change			
-	Add			
_	Remove			
5) _	Change			
_	Add			
· -	Remove			
6) _	Change			
-	· -			

____ Add

____ Remove

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	
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If an amondment arounds for an arch	annua malaysiGastian ay annuallatian of issued shows
provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption: $\frac{10/25/2019}{25}$ if other t date this document was signed.	han the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	l 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	
by" (voting group)	
(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 O 25 / ZO 9. Signature (By a director, president or otherofficer—if directors of officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) MASTER A VERSON DEST. (Typed or printed name of person signing)	
(Title of person signing)	
(rade of person signing)	