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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CRLENTERPRISES INC					
DOCUMENT NUMBER: <u>P1700012818</u>					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
CINDY R. ESTEVE-RIEFA Name of Contact Person CRL ENTERPRISES INC Firm/ Company 750 BOCCE COUCH					
Palm Beach Gardens, 71 33410 City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
CINDY R. ESTEVE-RIEGO at (646) 220.9323 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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment Section					

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CRL ENTERPRISES Tre
(Name of Corporation as currently filed with the Florida Dept. of State)
<u> </u>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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)
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 CINDY R. ESteve-Riera
Name of New Registered Agent CINDY R. ESTEVE-RIERA 750 BOCCE COUNT. (Florida street address)
(Florida street address)
New Registered Office Address: Palm Beach Gardens, Florida 33410 (City) (Zip Code)
(Zip Couc)
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.
X RieiaCK
Signature of New Registered Agent, if changing

Page 1 of 4

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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) _Change	P	CINDY R. Este	ve Riera 750 Bocce Car
Add			PB6
Remove			<u>A 33410</u>
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Ru spacific)
(Mach additional sheets, if necessary).	(De specific)
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<u> </u>	
The state of the s	
1117 1117 1117 1117	
If an amandment provides for an arch	anno malacrification or consollation of insued above
11 an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament it not contained in the amendment itself:
(ij noi applicable, maicule (VA)	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:	Immediately	
	(no more than 90 days after amendment file de	ate)
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirem Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the a sufficient for approval.	amendment(s)
☐ The amendment(s) was/were a must be separately provided j	pproved by the shareholders through voting groups. The follow or each voting group entitled to vote separately on the amenda	wing statement ment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	•
by	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder action action and shareholder action actio	areholder
Dated2	1712017 LUCACE director, president or other officer - if directors or officers ba	
Signature	Liela (L	
(By :	director, president or other officer - if directors or officers ha	ve not been
	eted, by an incorporator - if in the hands of a receiver, trustee,	or other court
appo	inted fiduciary by that fiduciary)	
	CINDY R. ESTEVE RIEFA (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	Water 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1