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| Special Instructions to Filing Officer: | |
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TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: IQP INTERNATION: | IONAL INC |
|--|---|
| DOCUMENT NUMBER: P170000142 | |
| The enclosed Articles of Amendment and fee are | submitted for filing. |
| Please return all correspondence concerning this n | natter to the following: |
| NATALIA HERNANDEZ | |
| | Name of Contact Person |
| CMP INTERNATIONAL | CONSULTANTS INC |
| | Firm/ Company |
| 10570 NW 27TH ST SUIT | E 103 |
| | Address |
| DORAL, FL 33172 | |
| | City/ State and Zip Code |
| INFO@CMPINTERNATIONAL | BIZ |
| E-mail address: (to be | used for future annual report notification) |
| 1 | |
| For further information concerning this matter, ple | ase call: |
| NATALIA HERNANDEZ | at (786) 503-5080 |
| Name of Contact Person | Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount mad | e payable to the Florida Department of State: |
| \$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

Articles of Amendment to Articles of Incorporation

| IQP INTERNATIONAL INC | | | | |
|--|--|-------------------------------|-------------------------------|----------|
| (Name of Co | rporation as currently | filed with the Florida De | pt. of State) | |
| P170000142 & 🕃 | 11 | | | |
| | (Document Number of | Corporation (if known) | | |
| Pursuant to the provisions of section 607,1006 its Articles of Incorporation: | i, Florida Statutes, this <i>F</i> | lorida Profit Corporation | adopts the following amendmen | nt(s) to |
| A. If amending name, enter the new name of | ofithe corporation: | | | |
| N/A | | | ent. | |
| name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association, | 1 Corp." "Inc." or "C | lo". A professional corpo | | |
| B. Enter new principal office address, if ap | onlicable: | N/A | | |
| (Principal office address MUST BE A STRE | | | | |
| | | | | |
| | | | | |
| C. Fatan ann anilina addaes if analisabl | | | | |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF | | | | |
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| | | | | |
| D. If amending the registered agent and/or | manistared office addre | ess in Florida, antouthe n | ama of the | |
| new registered agent and/or the new reg | | | aine of the | |
| N/A | ii | | | |
| Name of New Registered Agent | <u> </u> | | | |
| | | | | |
| | (Florida stre | et address) | | |
| New Registered Office Address: | | | , Florida | |
| | | City) | (Zip Code) | |
| | | | | |
| | | | | |
| New Registered Agent's Signature, if change I hereby accept the appointment as registered | | ith and accept the obligation | one of the notition | |
| Thereby accept the appointment as registered | | un ana accept the obligation | ns of the position. | |
| | | | | |
| | | | | |
| | Signature of New Re | gistered Agent, if changing | | |
| | | | | |
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| Please note the officer/di | rector tit | le by the first | letter of the office title: | |
|---|--------------------------|---------------------------|--|---|
| P = President; V = Vice | Presiden | i, T= Treasi | rer; S= Secretary; D= Director; TR= | Trustee; C = Chairman or Clerk; CEO = Chief |
| | | | | re than one title, list the first letter of each office |
| held. President, Treasure Changes should be noted | r, Direct I in the fo | or wouta oe Howino man | r 1 D. her - Currently John Doe is listed as th | he PST and Mike Jones is listed as the V. There is |
| a change. Mike Jones lea | ives the o | corporation, | Sally Smith is named the V and S. The: | se should be noted as John Doe, PT as a Change, |
| Mike Jones, V as Remove | | | | |
| Example: | | | | |
| X Change | <u>PT</u> | John Doe | | |
| X Remove | <u>v</u> | Mike Jone | | |
| X Add | <u>sv</u> | Sally Smit | <u>h</u> | |
| Type of Action (Check One) | <u>Title</u> | <u>N</u> | ame | <u>Addres</u> s |
| 1) Change | DIR | | DANIELA ESTEFANIA DAVILA | 10570 NW 27TH ST SUITE 103 |
| X Add | | | | DORAL, FL 33172 |
| Remove | | | | |
| 2) Change | DIR | (| CARLA DEL CARMEN DAVILA | 10570 NW 27TH ST SUITE 103 |
| X Add | | | | DORAL. FL 33172 |
| Remove | | | | 17 |
| 3) Change | | | | SER T |
| Add | | | | - 5 E |
| Remove | | | | |
| 4) Change | <u> </u> | | | BIUA |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
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| 6) Change Add | | | 1 | · · · · · · · · · · · · · · · · · · · |
| | | | | |
| Remove | | | II . | |

Page 2 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)

| ' ' ' | |
|---|---|
| E. If amending or adding additional Articles, | enter change(s) here: |
| (Attach additional sheets, if necessary). (Be | specific) |
| N/A | |
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| F. If an amendment provides for an exchange. | reclassification, or cancellation of issued shares, |
| | nt if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
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| The date of each amendment(s) adoption: |
|--|
| 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 as the locument's effective date on the Department of State's records. |
| 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) |
| 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 // 500 t. 15/2012 |
| 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) |
| PAUL EDMUNDO DAVILA. |
| (Tipped or printed name of person signing) |
| VIE PRESIDENT. |
| (Title of person signing) |