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COR AMND/RESTATE/CORRECT OR O/D RESIGN SWISS PET CARE, INC.

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COVER LETTER

| TO: Amendment Sect Division of Corp | | | |
|--|---|---|--|
| NAME OF CORPO | RATION: | SWISS PET CARE, I | NC. |
| DOCUMENT NUM | | P17000025773 | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corre | spondence concerning this ma | use to the following: | |
| | Harold L. Downing | | |
| | | Name of Contact Person | i. |
| | Downing Law Offices, P.A. | | |
| | | Firm/Company | |
| | 501 South New York Avenue | , Suite 220 | |
| | | Address | |
| | Winter Park, Florida 32789 | | |
| | | City/ State and Zip Code | |
| L.J | | | |
| | vning@haldowninglaw.com | sed for fitture annual report | พลที่ที่สะที่สุด) |
| | .cmail address: (10 00 to | sen tel turne suuren tebene | noun-salon) |
| For further information | on concerning this matter, pleas | se call: | |
| Harold L. Downing | _• | at (407 | 960 5927 de & Daytime Telephone Number |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check f | or the following amount made | payable to the Florida Depa | urtment 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) |
| Ān | ding Address sendment Section | Amand | Address Iment Section |
| | vision of Corporations | | on of Corporations Building |
| | D. Box 6327 llahassee, FL 32314 | | xecutive Center Circle |
| ** | | | essee, FL 32301 |

Articles of Amendment Articles of Incorporation ٥ſ SWISS PET CARE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P17000025773 (Document Number of Corporation (if known) Remains to the provisions of section 607.1006, Floride Statutes, this Elevide Profit Corporation adopts the following amendment(s) to in 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 MUSTEE 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 resistered 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) Florida New Registered Office Address: (Zip Code) (City) 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

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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)

Example:

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; CBO = 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 | PT John | 1 Doe | |
|-------------------------------|---------------------|-------------------|-------------------------|
| X Remove | <u>V</u> <u>Mik</u> | c Jones | |
| _X Add | SV Sall | y Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) X Change | PT | Astrid Oetliker | 948 Golf Course Parkway |
| Add | | | Davenport, FL 33837 |
| Remove | | | +92-+ 737-W |
| 2) Change | \$ | Juergen Fueligraf | 948 Golf Course Parkway |
| X Add | | | Davenport, FL 33837 |
| Remove | | | |
| 3) Change | D | Astrid Octliker | 948 Golf Course Parkway |
| X Add | | | Davenport, FL 33837 |
| Remove | | | |
| 4) Change | | | • |
| Add | | | |
| Remove | | | |
| | | | |
| 5) Change | • | | |
| Add | | | |
| Remove | | | |
| 6)Change | | | |
| Add | | | |
| Remove | | | |

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| If amending or adding additional Articles. | enter change(s) here: |
|--|--|
| If amending or adding additional Articles. (Attach additional sheets, if necessary). (Be | e specific) |
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| If an amendment provides for an exchange | e. reclassification, or cancellation of issued shares, tent if not contained in the amendment itself: |
| provisions for implementing the amendment (if not applicable, indicate N/A) | ent if not contained in the amendifient itself: |
| (y not approximate 1422) | |
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| Che-date of each speedment(s) a | dontionif other | than the |
|---|--|------------|
| late this document was signed. | | |
| Effective date if applicable: | | _ |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this I document's effective date on the De | slock does not meet the applicable statutory filing requirements, this date will not be list epartment of State's records. | ted as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were add by the shareholders was/were st | opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval. | |
| ☐ The amendment(s) was/were app must be separately provided for | proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| ъу | ." | |
| | (voting group) | _ |
| action was not required. The amendment(s) was/were ad | opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder | |
| action was not required. | | |
| Dated | April 13th, 2017 | |
| Signature | Fl. CHB | |
| (By a | director, president or other officer - if directors or officers have not been | |
| | ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary) | |
| | Astrid Octliker | |
| | (Typed or printed name of person signing) | - |
| | President | |
| | (Title of person signing) | - |

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