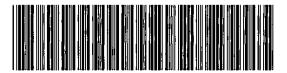
## P170000 34947

(Requestor's Name)
(Address)
(Address)
(,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

'TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: ADM U	JORLD SERVICES CORP
DOCUMENT NUMBER: P17000	20 34947
The enclosed Articles of Amendment and fee are submitted	for filing.
Please return all correspondence concerning this matter to the	ne following:
Mazio Gon	IALEZ
	e of Contact Person)
(	Firm/ Company)
3187 ARR	OWHEAD Lane (Address)
	(Address)
Kissimmee	D 34746
(City.	State and Zip Code)
flfoe	MSERVOBNAIL. COM uture annual report notification)
For further information concerning this matter, please call:	iture annual report notification)
	Z at 917 238 9208 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable	to the Florida Department of State:
(Ad	3.75 Filing Fee & Status dditional copy is Certified Copy closed) Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to
Articles of Incorporation

of October 1990
ADM WORLD SERVICES CORP
(Name of Corporation as currently filed with the Florida Dept. of State)
P170000 34947
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
A)/A The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
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: W/A
(Florida street address)  New Registered Office Address:
(City), Florida, [Zip Code)
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.
$\omega/A$ .
Signatule 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 X Remove X Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove	<u>s</u>	DANNY A VERA	3187 Arrawhied Ln Ussimmee FT 3474
2) Change Add			
Remove 3) Change Add Remove		·	
4) Change Add			
Remove  5) Change Add	Name - Control of Control		
Remove 6) Change Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
•				
N/A				
<del></del>				
	_			
	-			
	<u>.                                    </u>			

	e date of each amendment(s) adoption: 05/5/17 e this document was signed.	_, if other than the
Effe	ective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not burnent's effective date on the Department of State's records.	pe listed as the
Ada	option of Amendment(s) ( <u>CHECK ONE</u> )	
Ø	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated 05 25 17	
,	Signature  (By the chairman of vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
	Maeio Conzalez (Typed or printed name of person signing)	
	Pre sicent.  (Title of person signing)	į