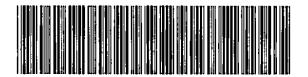
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COYER LETTER

TO: Amendment Section Division of Corpor			
NAME OF CORPORA DOCUMENT NUMBI	D_{i}	V AMERIC	1A /NC
			
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	ondence concerning this ma	atter to the following:	
-	Tosej	Name of Contact Person	res vo
	V	Name of Contact Person	
_		Firm/ Company	
_	383 E		ALA, Suite 10/3 1, FL 32701
	N1 -1	Address	// 71701
_	ACIAMO	oute SPRING	1, PL 32101
	Jd	@ IZONTV	. COM
	E-mail address: (to be us	sed for future annual report i	notification)
For further information	concerning this matter, pleas	se call:	
Joseph Dif	MANCE ICO	at (407	310-4522
Name of	Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for t	the following amount made	payable to the Florida Depar	rtment 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)
	ng Address	Street A	
	dment Section on of Corporations		nent Section of Corporations
-			. o. o. po. a

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment

to

		ncorporation		
1701	N AMER	ir.	C'	
(Name of Co	rporation as curren	tly filed with the Fiori	da Dent of State)	· · · · · · · · · · · · · · · · · · ·
0170	100,296	Ga	sa popie of outie)	
	(Document Number	of Corporation (if know	m)	
			•	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	. Florida Statutes, thi	s Florida Profit Corpor	nation adopts the following	owing amendment(s) to
A. If amending name, enter the new name of	f the corporation:	,		
	NI	4		
name must be distinguishable and contain is "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or	"Co". A professional	incorporated" or t corporation name i	The new he abbreviation nust contain the
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		NA		
				7.0
C. Enter new mailing address, if applicable		/-		- 1
(Mailing address MAY BE A POST OFFI		NA		
		. /	-	Ċ.)
				ب. المراجعة
D. If amending the registered agent and/or a	registered office add	ress in Florida, enter t	he name of the	1:1.8
new registered agent and/or the new regi	stered office addres	<u>s:</u>		co Co
Name of New Registered Agent	NA			
-				
 -	(Florida st	reet address)		
W B - 100 - 11	NIA	 ,		
New Registered Office Address:		(City)	, Florida	'Zip Code)
		(-19)	'	zap code)
New Registered Agent's Signature, if changing the language of the Agent's Signature, if changing the language of the language	ng Registered Agent igent. I am familiar	: with and accept the obli	gations of the positi	on.
	- •		5	
	NA			
	Signature of New H	Registered Agent, if char	nging	<u></u>

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.

<u>X</u> Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1)Change	Cox/D	Michael GibiLisco	383 Elyendon PLAZ9 # 1013
Add	·		ALAMONTO SPAINS, FL 32701
Remove			
2) Change	V.P/D	Denny Kuria	383 Emerson PLAZA #1013
<u>X</u> Add		,	ALtamente Springs FL 32701
Remove			
3) Change	VP/D	Jerry Goldstein	383 EMENSON PLANA #1013 ALTAMONTO SPRIMS FL 32701
X Add		·	ALTAMONTE SPRING FL 32701
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	. (Be specific)	(s) here:		
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		<u> </u>		
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	hange, reclassificati	on, or cancellation o	t issued shares,	
an amendment provides for an exc		amed in the anicitati	ent naçii.	
provisions for implementing the am	endment it not come			
or an experiment provides for an experimenting the am (if not applicable, indicate N/A)	u//n			
provisions for implementing the am	N/A		·	
provisions for implementing the am	N/A			
provisions for implementing the am	N/A			
provisions for implementing the am	N/A			
provisions for implementing the am	N/A			
provisions for implementing the am	N/A			
provisions for implementing the am	N/A			
provisions for implementing the am	N/A			
provisions for implementing the am	N/A			
an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	N/A			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: July 3 Jojo (nalmore than 90 days after amendment file date)	
(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 document's effective date on the Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without sharehol action was not required.	der action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	ndment(s)
□ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment. "The number of votes cast for the amendment(s) was/were sufficient for approval.	
•	
by MHTarity (voling group)	
Signature (By a director, president of other officer – if directors or officers have no selected, by an incorporator—if in the hands of a receiver, trustee, or off appointed fiduciary by that fiduciary)	
(Typed of printed name of person signing)	
- Prevident/D	
(Title of person signing)	