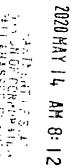
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JUN 03 2020 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: KETER GLOBAL	. INSTALATION			
	1BER: p17000044218				
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	stter to the following:			
	ERLYNG ANDREINA ALV	/ARADO LINARES			
	Name of Contact Person				
	KETER GLOBAL INSTALATION LORP				
	Firm/ Company				
	1336 NW 2ND AVENUE				
	Address				
	FORT LAUDERDALE FL 3	3311			
		City/ State and Zip Code	e		
	keterglobalinstallation@gma	il.com			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, plea RADO LINARES	se call:at (3031009		
Name	of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check (or the following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee 1. Monroe Street, Suite 810		
		Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of

KETER GLOBAL INSTALATION CORP.

(Name of C	orporation as currently	filed with the Florida Dept. o	f State)	
P17000044218	•		 ,	
-	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, this <i>F</i>	<i>lorida Profit Corporation</i> adop	ots the following amend	ment(s)
A. If amending name, enter the new name	of the corporation:			
KETER GLOBAL INSTALLATION CORE			The n	ew.
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Corp, "chartered," "professional association," or t	," "Inc," or "Co". A	mpany," or "incorporated" or professional corporation nam	the abbreviation "Corp	ord
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE		NOT APPLICABLE		_
			~1	-
				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		NOT APPLICABLE		
			100 mm	
			700	- ; 1 ;
D. If amending the registered agent and/or new registered agent and/or the new re-		ess in Florida, enter the name	of the	_ \\
NC	DT APPLICABLE			
Name of New Registered Agent		 		
	tFlorida stre	or all haven		
	ie wrau siec	A (lata ess)		
New Registered Office Address:		, F ('in)	lorida <u>(Zip Code)</u>	-
		•	·	
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	<mark>zing Registered Agent:</mark> Lagent, Lam familiar w.	ith and accept the obligations ϕ_i	f the position.	
	<i>;</i> //	, A		
-	. ,	zistered Agent, if changing		
	inginime ty from the	carerea rigera, y changing		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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{V}	Mike Jones			
X Add	\underline{SV}	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	ALVARADO ERICSON	10733 CLEARLY BLVD APT 201		
Add			PLANTATION FL 33324		
XX Remove					
2) Change		_			
Add					
Remove 3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

Attach ade	g or adding additional Ar litional sheets, if necessary).	(Be specific)			
		<u> </u>			
					
_					
					
		1.2			
	<u>.</u>				
f an amer	dment provides for an exc	change, reclassifica	tion, or cancellatio	on of issued shares.	
provision	s for implementing the am	endment if not cor	stained in the ame	ndment itself:	
(if no.	applicable, indicate N/A)				
	 -				
					•••
			 	<u></u>	
	<u></u>				

. .

The date of each amendment(s) a date this document was signed.	doption:, if otl	ner than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be lipartment of State's records.	listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder	lder
☐ The amendment(s) was/were add by the shareholders was/were so	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
Dated 5/11/	30	
selecte	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Erlyng Andreina Alvarada Linares (Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	_