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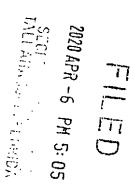
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CHERRIS I	NTRENATIONAL, INC
DOCUMENT NUMBER: 717000914	:01
The enclosed Articles of Amendment and fee are submitted for filing	:.
Please return all correspondence concerning this matter to the follow	ing:
Name of Con	HERFILS sact Person
CHEERIS INTRENA	TIONAL INC
- 7.1 NW 189 = St.	CEET
MIAMI FL City/ State an	33169
Cheri220 yahoo. E-mail address: (to be used for future and	ual report notification)
For further information concerning this matter, please call:	
Name of Contact Person at (305) 776 - 9162. Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Fl	orida Department of State:
S35 Filing Fee S43.75 Filing Fee S43.75 Filing Fee Certificate of Status Certified Co (Additional e enclosed)	py Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

CHERNIS INTICONAL, INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
17000091401	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(sts Articles of Incorporation:	.)
A. If amending name, enter the new name of the corporation:	
CHOSEL TULOSUATO 11/ Ma	
The new mame 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 MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	7
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:	
Norma of New Randorwald towns	
Name of New Registered Agent State S	
(Florida street address)	
New Registered Office Address:, Florida	
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.	
·	
<u> </u>	
Signature of New Registered Agent, if 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.

\underline{X} Change	$\overline{\mathbf{p}}$	<u>John Do</u>	<u>e</u>	
X Remove	<u>V</u>	Mike Jos	nes	
X Add	<u>SV</u>	Sally Sm	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	-	_ _		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_	,	
Add				
Remove				

xttaen <i>additie</i>	or adding add onal sheets, if r	riecessary).	(Be specific)					
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<u>Lan amendo</u> provisions fo	nent provides or implementi	<u>for an exchai</u> ing the amend	<u>nge, reclassif</u> dment if not :	<u>ication, or ca</u> contained in t	<u>ncellation of i</u> the amendme	ssued shares, nt itself:		
(if not a _l	oplicable, indi	cate N/A)						
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The date of each amendment(s) a	doption:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the Do	lock does not meet the applicable statutory filing requirements, transfer and state's records.	his date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes east for the amend officient for approval.	lment(s)
	proved by the shareholders through voting groups. The following seach 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)	
Dated	26-2020	
(By a d selecte	irector, president or other officer – if directors or officers have not d, by an incorporator – if in the hands of a receiver, trustee, or othered fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	President (Title of person signing)	