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JAN 26 2018

**I ALBRITTON** 

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

| Email / | Address: |  |  |  |
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## COR AMND/RESTATE/CORRECT OR O/D RESIGN JADECORP9, INC.

| Certificate of Status | 0       |  |  |
|-----------------------|---------|--|--|
| Certified Copy        | 0       |  |  |
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Corporate Filing Menu

Help

1/1

## Articles of Amendment Articles of Incorporation of

| Articles of Ame   | endment  |             |
|---|--|-------------|
| to<br>Articles of Incor   | rporation  |             |
| of  |  |             |
| JADECORP9, INC  | filed with the Florida Dept. of State)                 | # (T)       |
| DIA MOS   | 180  | 一変し         |
| (Document Number of C   | Corporation (if known)                                 | <b>c</b> •. |
|   |  | (S) to \$5. |
| Pursuant to the provisions of section $607.1006$ , Florida Statutes, this $F$ its Articles of Incorporation:  | lorida Proja Corporation adopts the following machines |             |
| A. If amending name, enter the new name of the corporation:   | _  |             |
|   | The new  |             |
| name must be distinguishable and contain the word "corporation." Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "C word "chartered," "professional association," or the abbreviation "E | 20 1 11 projustions of P                               |             |
|   | 16901 Collins Ave                                      |             |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)   | Unit 4203  |             |
|   | Sunny Isles Beach, FL 33160                            |             |
| 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 addr<br>new registered agent and/or the pew registered office address  | ress in Florida, enter the name of the                 |             |
| Name of New Registered Agent  |  |             |
| (Florido str  | rest address)  |             |
| ·   | Florida  |             |
| New Registered Office Address:  | (City) (Zip Code)                                      |             |
|   |  |             |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar  | t: with and accept the obligations of the position.    |             |
|   |  |             |
| Signature of Now  | Registered Agent, if changing                          |             |

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If ameading 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:

(Auach 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: XChange              | <u>pt</u> <u>J</u> | John Doe                |                            |
|-------------------------------|--------------------|-------------------------|----------------------------|
| X Remove                      | <u>v</u>           | Mike Jones              |                            |
| X Add                         | <u>sv</u>          | Sally Smith             |                            |
| Type of Action<br>(Check One) | Title              | Name                    | Address                    |
| 1) Change                     | P                  | Carlos O.B. de Miranda  | 200 Biscayne Boulevard Way |
| X Add                         |                    |                         | Apartment 4301             |
| Remove                        |                    |                         | Miami, FL 33131            |
| D. Cl                         | P                  | DEEKOTA TRADING LIMITED | 21 S.W. 15th Road          |
| 2)Change                      |                    |                         | Suite 200                  |
| Add<br>X                      |                    |                         | Miami, FL 33129            |
| Remove                        |                    |                         |                            |
| 3) Change                     |                    |                         | <u> </u>                   |
| Add                           |                    |                         |                            |
| Remove                        |                    |                         |                            |
| 4) Change                     |                    |                         |                            |
| Add                           |                    |                         |                            |
| Remove                        |                    |                         |                            |
| 5) Change                     |                    |                         |                            |
| Add                           |                    |                         |                            |
| Remove                        |                    |                         |                            |
| 6) Change                     |                    |                         |                            |
| _Add                          |                    |                         |                            |
| Remove                        |                    |                         |                            |

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| tach additional. | ding additional Acti<br>sheets, if necessary). | (Be specific)       |                     |                  |              |               |
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| an amendmen      | t provides for an exc<br>mplementing the am    | hange, reclussifica | ation, or cancellat | tion of issued : | shares,      |               |
| (if not appli    | cable, indicate N/A)                           | conment a par cor   | TRIBEG IN THE ALL   | Liididedi ise-ii | <u>*</u>     |               |
| () 1.5. 2//      | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,        |                     |                     |                  |              |               |
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| - Americal adoption   | it other than the                          |
|---|--|
| The date of each amendment(s) adoption:   |  |
| Effective date if applicable: (no more than 90 days after amendment file d  | ate)                                       |
| ·   |  |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.                         | ients, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE)  |  |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.   | amendment(s)                               |
| The amendment(s) was/were approved by the shareholders through voting groups. The folke must be separately provided for each voting group entitled to vote separately on the amendment. | owing statement<br>lment(s):               |
| "The number of votes east for the amendment(s) was/were sufficient for approval   |  |
| by  |  |
| (voting group)  |  |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action a action was not required.   | and shareholder                            |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and s   | hureholder                                 |
| action was not required.  |  |
| 01/25/2018<br>Dated   |  |
| Muanu   | _  |
| Signature (1) Addent or other officer - if directors or officers  | bave not been                              |
| selected, by in incorporator - if in the hands of a receiver, trusted   | e, or other court                          |
| appointed fiftytiary by that fiduciary)   |  |
| Carlos O.B. de Miranda  |  |
| (Typed or printed name of person signing)   |  |
| President   |  |
| (Title of person signing)   | <del></del>                                |

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