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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPOR	ATION: 5J5 E	<u>xervices Ju</u>	<u></u>
DOCUMENT NUMB	er: <u> </u>	0219	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	9645 Bru Jackson		·
For further information	concerning this matter, pleas	se call:	
Lecs CV Name o	MC VOLVECTE Contact Person	at (954)) 6734965 ode & Daytime Telephone Number
•	the following amount made		
S \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ing Address		Address dment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment

to Articles of Incorporation {of

B 2 / 2 2	, J			
Udb Severil		ith the Florida Dept. of Sta	>*a1	
$\widehat{}$	as currently med w	un the Florida Dept. of Sta	ite)	
	nt Number of Corpora	vian (ifinaum)		
(Documen	it Number of Corpora	mon (11 known)		
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	tatutes, this <i>Florida I</i>	Profit Corporation adopts th	e following amendme	ent(s) to
A. If amending name, enter the new name of the corp	oration:			
NA			The new	··
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A	npany," or "incorporated" professional corporation no	or the abbreviation	7
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDR</u>)	<u>ESS</u>)	, Ø.	WEY CO	
		N		
			20 20	T1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			994 , O	[[]]
(maning marcss <u>MAT DE AT OST OFF (CL DOS</u>)		ŢŅ.		E
		10/1		
			<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		orida, enter the name of th	<u>1e</u>	
Name of New Registered Agent	. ^_			
	1/1/2			
 :	(Florida street addres	isj		
New Registered Office Address:		, Florid	la	
The state of the s	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I detect the appointment as registered agent.		accept the obligations of the	position.	
	N'U			
Signatu	re of New Registered	l Agent, if changing		

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	Sandes Regario	9645 Brumindays Rd
X Add		Vanducky de beuza	ge45 Brymindaus Rd Jacksonnille, Fl
Remove		J	32256
2) Change			
Add			
Remove			——————————————————————————————————————
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<u> </u>
5) Change		_	
Add			
Remove			- N
6) Change			
Add			- 1/1/2
Remove			\ \ \

Temperature in the grace of the coolings.	ticles, enter change(s) here: (Be specific)
	
	
f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(у пол арупсате, такае (ул.)	
	· //

	•••	
: .		

04.57.5018

The date of each amendment(s) adoption: , it other than the date this document was signed.

03.22.2018

Effective date <u>if applicable</u>:

tion more than 90 days after amendment the dater

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

Adoption of Amendment(s)	(CHECK ONL)
☐ The amendmentes) was were adopted by the shareholders was were suffi-	ed by the shareholders. The number of votes cast for the amendmentes cient for approval
☐ The amendment(s) was were appro- outs) to x pinel(A protect) to ca	ved by the shareholders through voting groups. The following statemed ich voting group cottaled to be to separately on the anicolation alexi-
The number of votes east to	the amendments) was were sufficient for approval
hv	•
	(Colin2 20 pp)
☐ The amendmentes) was were adopted action was not required.	ed by the board of directors without shareholder action and shareholder
The amendmentist was were adopted	ed by the incorporators without shareholder action and shareholder
03.55 2018 Dated	
selected f	ctor president or other officer of directors or officers have not been by an incorporation of in the hands of a receiver trustee, or other court inductary by that fiduciary)
ı	OCEANI EDA SILA A A ANDERITA
	(Typed or printed name of person signing)
413	CLIUS of person signings