## P18000035045

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C. GOLDEN MAR 2 3 2018

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: COBICA INTERN	IATIONAL CORP	
DOCUMENT NUMB	D19000035045		
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	JOSE AVENDANO		
-		Name of Contact Person	n
-		Firm/ Company	
	8117 VINELAND AV		
-		Address	
	ORLANDO, FL 32821		
		City/ State and Zip Cod	e
ale21v	e@gmail.com		
	E-mail address; (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
JOSE AVENDANO		at ( <u>407</u>	300-4950
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address Indiment Section Ission of Corporations Box 6327 Islansee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assec, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILEU

2016 MAR 22 PH 4: 07

COBICA INTERNATIONAL CORP	· · · · · · · · · · · · · · · · · · ·
	rently filed with the Florida Dept. of State
P18000025045	
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes its Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	<u>n:</u>
N/A	The new
	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
	•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
(Mailing address MAT BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
N1/A	uress.
Name of New Registered Agent	
(Flori	ida street address)
New Registered Office Address:	. Florida
tion registered space ranges.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A	
I hereby accept the appointment as registered agent. I am fam	iliar with and accept the obligations of the position.
Signature of N	New Registered Agent, if changing
Signam Copi	

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:

 $P \approx President; V = Vice President; T \approx Treasurer; S = Secretary; D = Director; TR = Trustee; C \approx Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer. Director would be PTD.$ 

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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change	Р	JOSE AVENDANO	8117 VINELAND AV
X Add			ORLANDO, FL 32821
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add -		•	
Remove			
4) Change	- 19		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) (Be specific)			
			-	
			,	
				·
			_	
			3	
an amendment provides for an exch provisions for implementing the amer	<u>ange, reclassification</u> adment if not contain	n, or cancellation of	<u>issued shares,</u> at itself:	
(if not applicable, indicate N/A)		amename	<u> </u>	
			·	

The date of each amendment(s) :	03/14/2018	, if other than the
date this document was signed.	шория.	
03/ Effective date <u>if applicabl</u> e:	14/2018	
Effective date <u>if applicante</u> .	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this repartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendmentflicient for approval.	ent(s)
	oproved by the shareholders through voting groups. The following stater each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	,``	
	(voting group)	
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	older
☐ The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	
03/19/201 Dated		
Signature	Jose Avendano	
select	director, president or other officer – if directors or officers have not be ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	JOSE AVENDANO	
	(Typed or printed name of person signing)	
	PRESIDENT	
~	(Title of person signing)	