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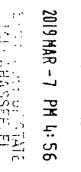
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C. GOLDEN MAR 1 6 2019

COVER LETTER

Division of Corporations Wefreelawer NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43,75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy

is enclosed)

Articles of Amendment

to Articles of Incorporation FILED

C ,		of		2019 HAR - 7	DH (-
Metreelancer	Global	Tech	IvC.		ការ មុះ មួ
(Name of C	orporation as curre	ently filed with the	Florida Dept. of St	ate)	J. J.
P180	2000 4	3199		Para maradas S	SEE, FL
	(Document Number	er of Corporation (if	known)		
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, t	his <i>Florida Profit C</i>	orporation adopts the	ne following amen	idment(s) to
A. If amending name, enter the new name	of the corporation:				
				The	new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designatio word "chartered," "professional association	on "Corp," "Inc," o	r "Co". A profess			
B. Enter new principal office address, if a	pplicable:				-
(Principal office address <u>MUST BE A STRE</u>	EET ADDRESS)				
					_
				 	_
C. Enter new mailing address, if applicab	le:				
(Mailing address MAY BE A POST OF)					
				·	_
D. If amending the registered agent and/or	r registered office a	ddress in Florida, c	enter the name of th	<u>he</u>	
new registered agent and/or the new re	gistered office addi	<u>'ess:</u>			
Name of New Registered Agent	•				
		•			
-	(Florida	street address)	· ·		
New Registered Office Address:		(City)	, Florid	ia (Zip Code)	_
		(- 2/		. ,	
New Registered Agent's Signature, if change					
hereby accept the appointment as registered	l agent. I am famili	ar with and accept t	he obligations of the	position.	
		_			
	Signature of Ne	w Registered Agent	if changing		
			y 0 0		

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> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	Kristen Bragdi	2349SWAWIqueras
_X Add		Ü	Portst Lucie, FL
Remove			34953
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			-
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
 	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument it not contained in the amendment usen.
	
	

	if other than the
this document was signed.	
ctive date <u>if applicable</u> : (no more than 90 days after amendment file date)	
(no more than 50 days after amenanem file date)	
e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not iment's effective date on the Department of State's records.	be listed as the
ption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By addirector, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of person signing)	