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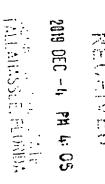
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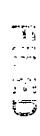
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COVER LETTER

Division of Corporations NAME OF CORPORATION: FONDREN INC DOCUMENT NUMBER: P19000034572 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: FORTUNATA ESPINOZA Name of Contact Person CORP SVCS INTL Firm/ Company 7050 W PALMETTO PARK RD, STE 15 300. Address BOCA RATON, FL 33433 City/ State and Zip Code OPERATIONS@ACHIEVEGEA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 503 5983

Area Code & Daytime Telephone Number FORTUNATA ESPINOZA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

Mailing Address

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327

Street Address

(Additional copy is

enclosed)

Amendment Section
Division of Corporations
The Centre of Tallahassee

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

FONDREN INC.				
	of Corporation as curre	ntly filed with the Florida Dept. of S	tate)	
P19000034572	/D N . I		······································	
	(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation adopts	the following amendn	nent(s) to
A. If amending name, enter the new n	ame of the corporation:			
b distinct the dist		' th	The ne	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp." "Inc." or "Co".	A professional corporation name i	nust contain the wor	^r d
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		9907 THREE LAKES CIRCLE.		
		BOCA RATON, FL 33433	2019	errysa
			EC	
		41-00-00-00-00-00-00-00-00-00-00-00-00-00	-	******
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				
		7050 W PALMETTO PARK RD	o. STE-15 300.	Comment of
		BOCA RATON, FL 33433	<u> </u>	
D. If amending the registered agent an new registered agent and/or the new			the	
Name of New Registered Agent				
	7050 W PALMETTO PA	ARK RD. STE 15-300.		
	(Florida :	street address)		
New Registered Office Address:	BOCA RATON	, Flori	33433	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Ages ered agent. I am familia.	nt: r with and accept the obligations of th	e position.	
-	Signature of New	Registered Agent, if changing		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a	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)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	PORTAL, TATYANA M	9907 THREE LAKES CIRCLE.
Add			BOCA RATON, FL 33428
Remove			
2) X Change	<u>S</u>	MARCHENA, ALDO	9907 THREE LAKES CIRCLE.
Add			BOCA RATON, FL 33428
Remove 3) Change		····	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change		-	
Add			
Remove			

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· .	

7-11-12	
F. If an amendment provides for an exchange, reclassification, or cancellation of issue	ed shares,
provisions for implementing the amendment if not contained in the amendment it (if not applicable, indicate N/A)	<u>self:</u>
(y noi appricame, matcute 1974)	
	-

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 ONE) ☐ 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 east for the amendment(s) was/were sufficient for approval 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. Dated_DEC 03, 2019 Signature (By a director, 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) ALDO MARCHENA (Typed or printed name of person signing) SECRETARY

(Title of person signing)