## P190000 47418

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO		ERNATIONAL GROUP C	CORP	
	P19000047418 BER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	BUM PARK			
	Name of Contact Person BP STRATEGIC SOLUTIONS, LLC			
	11100 NW 72 TER	Firm/ Company		
	MIAMI, FL 33178	Address		
		City/ State and Zip Cod	e	
bparl	c@bpstrategics.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
BUM PARK		305 at (	735-925()	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address 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		

## Articles of Amendment to Articles of Incorporation of

## GINFOTECH INTERNATIONAL GROUP CORP

· - ·	as currently filed with the Florida Dept. of State)		
P19000047418			
(Document	t Number of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following	ig amen	dment(
A. If amending name, enter the new name of the corporate	oration:		
		_The	пеш
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abl	"corporation," "company," or "incorporated" or the a "Inc," or "Co". A professional corporation name must breviation "P.A."	bbrevia contain	ition the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>ESS</u> )		_
			<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			S <u>⊼</u> if.
<del></del>		<u>ت</u>	0.50
		- E	
		<del></del>	777 7077 777
D. <u>If amending the registered agent and/or registered</u> new registered agent and/or the new registered off		辛	- 25 c
		9: 2	7.1
Name of New Registered Agent		_ ^3	
	(Florida street address)	_	
Name Production of COST and Administra	, Florida		
New Registered Office Address:	(City) (Zip	Code)	
N D A A Circ if abim Basina			
New Registered Agent's Signature, if changing Registed I hereby accept the appointment as registered agent. I am	m familiar with and accept the obligations of the position.		
Signatu	re 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 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 = ChExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each off 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 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 Chan, 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>	<u>Name</u>	<u>Addres</u> s
1) Change	S	MILDRED JEANINE DUARTE	8514 NW 66 STREET
X Add			MIAMI, FL 33166
Remove			
2) Change			
Add			<del></del>
Remove			
3 ) Change			
Add			
Remove			
4) Change			<del></del>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate NIA)	ttach additional	dding additional Ai sheets, if necessary	). (Be specific)				
provisions for implementing the amendment if not contained in the amendment itself:							
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(if not applicable, indicate N/A)	<u>provisions for in</u>	nplementing the an	<u>nendment_if_not_c</u>	ontained in the	<u>e amendment it</u>	<u>self:</u>	
	(if not applie	able, indicate N/A)					
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The date of each amendment(s) ac	doption:	, if other than
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
JUNE II.		
Dated	<del></del>	
Signature (By a d	irector, president or other officer – if directors or officers have not been	
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	EDGARDO REYES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	