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OCT 1 5 2019 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Internet Marketing Resources lac. DOCUMENT NUMBER: P190000 655,24 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: XochiH A. Olivares

Name of Contact Person Internet Markoting Resources Inc Firm/Company 1227 S. 21St AV. #202 Address Hollywood, FL 33020
City/ State and Zip Code IMar Keting re cources @ amail. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Xochit Olivares at (SIS) 2560514

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

\$35 Filing Fee

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

□S43.75 Filing Fee &

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Street Address

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enclosed)

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

□S52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment to Articles of Incorporation

Articles of frico.	rporation
Internet marketing Res	filed with the Florida Dept. of State)
0190000 65521	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1227 S. 21St AV. #202 Holly wood, FL 38020
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	1227 S. 215t Av. #202 Holly Wood, FL 33020
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent Xochitl Oliva	0.
1227 S. 2157 (Florida stree	
New Registered Office Address: 1227 S. 218+	City) Hollywood, Florida 33C20 #202 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Net	Significant special sp

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>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Xochitl Olivares	1227 S. 21st Av. #202
Add			Hollywood on Fi
Remove			33020
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change	***************************************		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	or adding additional Articles, enter change(s) here: ional sheets, if necessary). (Be specific)	
	·	
		
an amendr	ment provides for an exchange, reclassification, or cancellation of	issued shares,
	for implementing the amendment if not contained in the amendme applicable, indicate N/A)	nt itseir:
(ij nor a	gymettore, materially	
		· ••••

The date of each amendment(s) adoption:	Septem bu	r 10, 2019	if other than the
date this document was signed.			
Effective date <u>if applicable</u> :	ptember 2 (no more than 90 days a	0,2019	
	(no more than 90 days a	fter amendment file date)	
Note: If the date inserted in this block does in document's effective date on the Department of	not meet the applicable sta f State's records.	tutory filing requirements, this	date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)		
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number approval.	of votes cast for the amendmen	nt(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	ne shareholders through voti g group entitled to vote sepe	ng groups. The following states trately on the amendment(s):	ment
"The number of votes cast for the ame	ndment(s) was/were suffici	ent for approval	
by	ting group)		
(vo	ting group)		
 The amendment(s) was/were adopted by the action was not required. □ The amendment(s) was/were adopted by the action was not required. 			lder
Signature (By a director, presselected, by an incomplete)	ident or other officer - if di	irectors or officers have not been of a receiver, trustee, or other co	n nuri
appointed fiduciary	by that fiduciary)		
-	(Typed or printed name of p	person signing)	 _
	Divector (Title of person		