P20000026543

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SECRETARY OF STATE

12/05/20 Oh

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR		ERNATIONAL SHIPPING	INC				
DOCUMENT NUMI	P20000026543 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:					
	RENEE MORRISON						
	DROP SPOT INTERNATIO	Name of Contact Person NAL SHIPPING INC	1				
	Firm/ Company 4151 SAN MARINO BLVD APT 304						
	Address WEST PALM BEACH, FL 33409						
		City/ State and Zip Code	2				
	DROPSPOTISLTD@GMAIL	L.COM					
	E-mail address: (to be us	sed for future annual report	notification)				
For further information	n concerning this matter, pleas	se call:					
RENEE MORRISON		561	410-3464				
Name o	of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check fo	r 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)	S\$2.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

FILED

Articles of Amendment to Articles of Incorporation of

2020 NOV -5 PM 3: 52

SECRETARY OF STATE
TALLAHASSEE, FL

DROP SPOT INTERNATIONAL SHIPPING INC (Name of Corporation as currently filed with the Florida Dept. of State) P20000026543 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation; A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp., "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. 4401 Annette Street 3. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) West Palm Beach FL 33409 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) __, Florida_ New Registered Office Address: _ (Cuv) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Doc		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>\$V</u>	Sally Sr	nith	
Type of Action (Check One)	Title		Name	Address
1) Change	Trea		RICHARD KAMEKA	4797 FOXWOOD CIR
X Add		_		WEST PALM BEACH FL 33418
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		.		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

ttach additional sheets, if necessary).	(Be specific)			
ointing Richard Kameka as Treasurer				
				
				
		· · · · · · · · · · · · · · · · · · ·		
				
	·			
f an amendment provides for an exc	nange, reclassification, or	cancellation of issued sh	iares,	
provisions for implementing the am	ndment if not contained i	n the amendment itself:		
(if not applicable, indicate N/A)				
				
				

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	10.27.2020	
	10-26-2020	
Effective date if applicable:	(no more than 90 day	s after amendment file date)
	is block does not meet the applicable Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board	of directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wei		nber of votes east for the amendment(s)
	approved by the shareholders through for each voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
"The number of votes	east for the amendment(s) was/were su	Ticient for approval
by		."
-,	(voting group)	
Dated	11-3-2020	<u></u>
selo	a director, president or other officer - ected, by an incorporator - if in the har cointed fiduciary by that fiduciary)	if directors or officers have not been ds of a receiver, trustee, or other court
	-Rence-m	
	(Typed or printed name	of person signing)
	PRESIDENT	
	(Title of person signing)