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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: JOSEPH D. INVESTMENT CORP
DOCUMENT NUMBER: P200000 57195
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dieudonne Joseph Name of Contact Person JOSEPH D. INVESTMENT CORP Firm Company 48.5.5 38th Cir Apt 203 Address Vero Beach Florida 32.967 City State and Zip Code Joseph Trans Portation 200 9 Mail Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (561) 414-8769 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

JOSEPH D. TNVESTMENT CORP (Name of Corporation as currently filed with the Florida Dept. of State)	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P20000057195	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	g amendment(
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A."	n "Coro"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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)	
New Registered Office Address:	553
	1007-2
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	PH 6: 21
Signature of New Registered Agent, if changing	
Signature of their negatiered rigent, if changing	
Check if applicable [] The amendment(s) is fare being filed oursement to 1.607.0120 (113 (a) 5.5)	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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; CEQ = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office k 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. Ther 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 Chai Mike Jones, V as Remove, and Sally Smith, SV as an Add. Example: X Change PT <u>John Doe</u> X Remove \underline{V} Mike Jones \underline{X} Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> Address. (Check One) SYLPhida ovil Vero Beach, Fl 32967 1) ____ Change Sylphida ovil, vas an add X Add ____ Remove

2) ____ Change ____ Add ____ Remove 3) ____ Change ____ Add ___ Remove 4) ____ Change Add ____ Remove *5)* _ Change ____ Add ____ Remove 6) ____ Change ____ Add

____ Remove

Attach additional sheets, if necessary).	ticles, enter char (Be specific)				
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an amendment provides for an excl	hange, reclassifi	cation, or cane	ellation of iss	ued shares	
<u>rovisi</u> ons for implementing the ame	endment if not c	ontained in the	amendment	itself:	
(if not applicable, indicate N/A)				<u> </u>	
					
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The date of each amendment(s) adoption:	, if other tha
date this document was signed.	_
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wil document's effective date on the Department of State's records.	I not be listed a
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	l shareholder
☐ 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)	
Dated	
(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)	
Typed or printed name of person signing)	
President	
(Title of person signing)	