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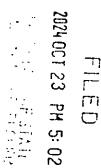
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CEF	RTITIFIED TRAN	SLATION EXPERTS I	NC
DOCUMENT NUMBER: P240000	64321		
The enclosed Articles of Amendment	and fee are submi	tted for filing.	
Please return all correspondence conc	erning this matter	to the following:	
ALEXANDE	R GOFMAN		
	- :	Name of Contact Person	
CERTITIFIED	TRANSLATION	EXPERTS INC	
-		Firm/ Company	
18001 N. BAY	' RD. APT 506	. ,	
		Address	
SUNNY ISLE	S BEACH, FL 33	160	
	(City/ State and Zip Code	
EXPERTTRA	NANSLATE@GN	AAIL.COM	
		for future annual report	notification)
For further information concerning th	is matter, please c	all:	
ALEXANDER GOFMAN		at (312	, 759-9999
Name of Contact Person			le & Daytime Telephone Number
Enclosed is a check for the following	amount made pay	able to the Florida Depa	rtment of State:
-	ate of Status	3843.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 321	ations	Amend Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

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

FILED 2024 OCT 23 PM 5: 05

	111 3.03
as currently filed with the Flor	ida Dept. of State)
it Number of Corporation (if kno	wn)
tatutes, this <i>Florida Profit Corpo</i>	oration adopts the following amendment(s
ooration:	
	The new
or "Co". A professional corpo	porated" or the abbreviation "Corp.," oration name must contain the word
ESS)	_
	
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office address in Florida, ente	r the name of the
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	poration: poration," "company," or "incorpor "Co". A professional corportion "P.A." ESS)

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	PT	John Doe	
X Remove	$\underline{\mathbf{V}}$	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) X Change	<u>PT</u>	ALEXANDER GOFMAN	18001 N. BAY RD. APT 506
Add			SUNNY ISLES BEACH, FL 33160
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). (Be specific) If 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 NA)	If amending or adding addition	aviationes, enter change(s)		
provisions for implementing the amendment if not contained in the amendment itself:	(Attach <i>additional sheets, if nece</i> .	sary). (Be specific)		
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(if not applicable, indicate N/A)	provisions for implementing t	e amendment if not contai	ned in the amendment it	self:
	(if not applicable indicate	(Z4)		
	(y ····· upprictions, ·······	,		
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	s) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
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/wer	adopted by the shareholders. The number of votes cast for the amendmes sufficient for approval.	ent(s)
	approved by the shareholders through voting groups. The following sta for each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
by	(voling group)	
Dated	14/0/160/Melin	
sele	a director, president or other officer – if directors or officers have not be cted, by an incorporator – if in the hands of a receiver, trustee, or other ointed fiduciary by that fiduciary)	
	ALEXANDER GOFMAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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