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MAY 3 1 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: _CAREER PATH TRAINING CORP. DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DONALD E. HUDSON, II Name of Contact Person CAREER PATH TRAINING CORP. Firm/ Company 11300 4TH STREET NORTH, SUITE 200 Address ST PETERSBURG, FL 33716 City/ State and Zip Code DHUDSON@ROADMASTER.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DONALD E. HUDSON, II Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **□\$**43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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

CA	REFR	PAT	TH TR	AINING	CORP

CAREER PATH TRAINING CORP.				
(<u>Name</u>	of Corporation as curre	ntly filed with the Flori	ida Dept. of State)	<u> </u>
P95000023191				
	(Document Number	r of Corporation (if know	vn)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006. Florida Statutes. th	sis <i>Florida Profit Corpo</i>	ration adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
N/A				The new
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional		the abbreviation
B. Enter new principal office address.	if annlicable:	N/A		
(Principal office address MUST BE A S				
C. Enter new mailing address, if apple (Mailing address MAY BE A POST) D. If amending the registered agent and new registered agent and/or the new registered	OFFICE BOX) nd/or registered office adwregistered office addre		the name of the	TALL MIAS SEE FLORIDA
Name of New Registered Agent	N/A 			
New Registered Office Address:	(Florida N/A	street address)	Florida	
the register of confee men ess.		(City)	, 1 torida	(Zip Code)
New Registered Agent's Signature, if of I hereby accept the appointment as regis			ligations of the pos	tition
,	Signature of New	· Registered Agent if che	mging	

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	GREG SCHMITZ	11300 4TH STREET N. STE 200
Add			ST PETERSBURG, FL 33716
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

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 N/A)	E. <u>If amending or a</u> (Attach additional	dding additional Arti	cles, enter change((Be specific)	s) here:		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	N/A		(:			
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(if not applicable, indicate N/A)	If an amendment	provides for an exch	ange, reclassification	on, or cancellation	n of issued shares,	
N/A			idment ii not conta	ined in the amen	ament itseit:	
	N/A					
						
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	MAY 22, 2018	
The date of each amendment(s) addate this document was signed.	loption:	, if other than the
	Y 22, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendmen fficient for approval.	nt(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
J	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
MAY 22.	2018	
selecte	director, president or other officer – if directors or officers have not been done by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	en
	BRADLEY A. BALL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u> </u>