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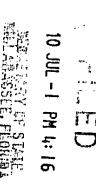
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: KUr+D	2. Zimmerman, PA
DOCUMENT NUMBER: P94000	274636
The enclosed Articles of Amendment and fee are su	ibmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Kurt Zimme	of Contact Person
<u> Kurt D. Zim</u>	nerman, PA
2400 E. Com	nerciul Bluel. #820 Address
Fr. Lauderdad City/s	e FL 33308 tate and Zip Code
E-mail address: (to be used for	
For further information concerning this matter, plea	se call:
Name of Contact Person	at (954) 202.7440 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
\$35 Filing Fee \$\times \text{S43.75 Filing Fee & Certificate of Status}	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (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 ICUT+ D. Zimmerman, PA. (Name of Corporation as currently filed with the Florida Dept. of State) (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:

amendment(s) to its Articles of incorporation	•			
A. If amending name, enter the new name	of the corporation	on:		
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or to name must contain the word "chartered," "p	ı the word "cor <u>j</u> he designation "C	poration," "coi lorp," "Inc," oi	npany," or "ineor "Co". A professi	porated" or the
B. <u>Enter new principal office address, if a</u> Principal office address <u>MUST BE A STRE</u>		(No	CHANGE)	
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF F</u>		(NO CA	HANGE)	
D. If amending the registered agent and/or	r registered office	address in Flo	rida, enter the nan	ne of the
new registered agent and/or the new re-	gistered office ad	<u>dress:</u>		
Name of New Registered Agent:	NA			
New Registered Office Address:	(Flor	ida street addre	ss)	
			, Florida_	
	(City)	 -	(Zip Code)	<u></u> -
New Registered Agent's Signature, if chang	ging Pagistored A	.αent·		
hereby accept the appointment as registered			ccept the obligations	s of the position.
	N/A		- 2	
	Signature of New	Registered Age	ent, if changing	

F. 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;	<mark>removed a</mark> (Attach add	<mark>nd title, name, and address o</mark> litional sheets, if necessary)	feach Officer and/or Director bein	g added:
E. If amending or adding additional Articles, enter change(s) here: ~ ~ ~ //A (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	<u> Fitle</u>	<u>Name</u>	Address	Type of Action
Add Remove Add Add Remove				
Remove Add Add Remove Add Remove Add Remove Add Remove Add Remove Add Remove Add Add Remove Add Add Remove Add Additional sheets, if necessary). (Be specific)			<u></u>	L Kemove
E. If amending or adding additional Articles, enter change(s) here: — ~//A (attach additional sheets, if necessary). (Be specific)				
E. If amending or adding additional Articles, enter change(s) here: — ~ ~ //A (attach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issued shares,				
(attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,				
(if not applicable, indicate N/A)	provisi	ons for implementing the am		

The date of each amendment(s) a	doption: U·18·10
Effective date if applicable:	doption:
(no	o more thah 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were act by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	oproved by the shareholders through voting groups. The following statement 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	ing group)
(voi	ing group)
The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ad action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated U ·	18.10
Signature // (By a di selected	rector president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)
_1	(Typed or printed name of person signing)
	President (Title of person signing)