P98000554a5

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: JIMEL HOLDING	S				
DOCUMENT NUMB	ER: P98000055425					
	of Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
	IAMES T NOONAN					
-	Name of Contact Person					
•	JIMEL HOLDINGS					
-	Firm/ Company					
:	2800 NW 22ND TERRACE					
-	Address					
1	POMPANO BEACH, FL 330)69				
-	·	City/ State and Zip Code	;			
GPAR	SONS@ADVANTAGEPES	Т.СОМ				
-		sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
GINA PARSONS		954 at (275-3988)			
Name o	f Contact Person	Area Coo	le & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:			
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State) P98000055425 (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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: (City) 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

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	JAMES A NOONAN	2741 NE 1ST STREET	
X Add			POMPANO BEACH, FL 33062	
Remove				
2) X Change	T	GINA N PARSONS	15252 74TH STREET N	
Add			LOXAHATACHEE, FL 33470	
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	-			
Add				
Remove				
6) Change				
Add				
Ramasa				

	(Be specific)
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:

The date of each amendment(s) adoption: date this document was signed.	, if other than the
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 will document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
MAY 26, 2017 Dated	
Signature Transcription of the Signature	
(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)	
JAMES T NOONAN	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	