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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: DeVries	International	linc.	
	er: <u>P9900005</u>			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corresp	oondence concerning this ma	tter to the following:		
	Thomas	S DeVnes Name of Contact Person		
_		Name of Contact Persor	1	
	DeVries	Internationa	dlnc.	
_		International Firm/ Company	<u> </u>	
_		Address		
-	370007	City/ State and Zip Code		
- For further information	E-mail address: (to be us		notification)	
Lauren D	DeVries	at (561	de & Daytime Telephone Number	72 288 [191
Name of	f Contact Person	Area Co	de & Daytime Telephone Number	- office
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amer Divis	ing Address indment Section ion of Corporations Box 6327	Amend Divisio	Address ment Section in of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

DeVries Internatio	nallne. som og mullig
(Name of Corporation as currentle	v filed with the Florida Dept. of State)
P9900005648	9
	*Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this aits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "contain the word "corporation," "contain the word "corporation," "contain the word "corporation," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.,"
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 addr	
new registered agent and/or the new registered office address	<u>i</u>
Name of New Registered Agent	
lFlorida str	get address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agents I hereby accept the appointment as registered agent. I am familiar v	
Simustone of Man D	gaictared downt if changing
Signature of New Ki	egistered Agent, if changing
Check if applicable	

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

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 V Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Address Name (Check One) 463 Rudder Cay Way Thomas DeVries 1) X Change Jupiter FL 33458 ___ Add __ Remove Office Lauren DeVries 3050 SE Dixie Hwy 2) ____ Change Stuart FL 34997 X Add must be home address: Remove 2811 SW Lakemont Pl. Change Palm City FL 34990 $_$ Add ___ Remove 4) ____ Change Add Remove 5) ____ 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/4)	implementing the amendment if not contained in the amendment itself:
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provisions for implementing the amendment if not contained in the amendment itself:	implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	icable, indicate N/A)

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The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file dat	te)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast for the a ficient for approval.	mendment(s)
	oved by the shareholders through voting groups. The followeach voting group entitled to vote separately on the amendm	
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Signature (By a disselected	ector, president or other officer – if directors or officers hav , by an incorporator – if in the hands of a receiver, trustee, o	
аррони	d fiduciary by that fiduciary)	
_	Thomas DeVries	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	-

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