(Re	equestor's Name)					
(Ac	ldress)					
(Ac	idress)					
(Ci	ty/State/Zip/Phone	> #)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	SAINT	RIVER INTERNATIO	NAL BUSINESS, INC	
DOCUMENT NUMBER:	P99000102538			
The enclosed Articles of Amer	udment and fee are su	ibmitted for filing.		
Please return all corresponden	ce concerning this ma	atter to the following:		
		RAQUEL RIVAS		
		Name of Contact Per	rson	
· <u></u>		Firm/ Company		
	662:	5 MIAMI LAKES DRIV	'E SUITE 417	
		Address		
		MIAMI LAKES. I	FL 33014	
		City/ State and Zip C	Code	
srinformatic	n99@gnail.com			
E-1	nail address: (to be u	sed for future annual rep	ort notification)	
For further information concer	ning this matter, pleas	se call:		
RAQUEL RIVAS	F.	AX 1	888-898-4479 Code & Daytime Telephone Number	
Name of Conta	ct Person	Area	Code & Daytime Telephone Number	
Enclosed is a check for the fol	lowing amount made	payable to the Florida D	Department of State:	
	43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Am Div Clif	eet Address endment Section ision of Corporations iton Building I Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

SAINT RIVER INTERNATIONAL BUSINESS, INC.

(<u>Name c</u>	of Corporation as curren P990001023	tly filed with the Florida Depi 538	<u>i. of State</u>)	
		of Corporation (if known)	<u> </u>	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation ac	dopts the following a	mendment(s) t
A. If amending name, enter the new na	me of the corporation:		77)	he new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corpora	orated" or the abbr	reviation
B. Enter new principal office address,	if applicable:	2875 NE 191 STREET		
(Principal office address MUST BE A STREET ADDRESS)		SUITE 500		
•		AVENTURA, FL 33180		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OF FICE BOX)		2875 NE 191 STREET		
· ,,,		SUITE 500		
		AVENTURA, FL 33180		
D. If amending the registered agent an new registered agent and/or the new	w registered office addre		ne of the	
Name of New Registered Agent	RAQUEL RIVAS			
	2875 NE 191 STREETS			
	(Florida s AVENTURA	rreet address)	33180	
New Registered Office Address:		tCity)	Florida	le)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist			IS of the position CRE IASSE	2011 JUL
	Signature of New	Registered Agent, if changing	SHE. FLO	e

• 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: XChange	<u>PT</u>	John Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	VP	RAQUEL RIVAS	6625 MIAMI LAKES DRIVE
Add			SUITE 417
· X Remove			MIAMI LAKES, FL 33014
2) Change	VP	RAQUEL RIVAS	2875 NE 191 STREET
X Add			SUITE 500
Remove			AVENTURA, FL 33180
3) Change			
Add			
Remove			
4) Change			March Carlo
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding add (Attach additional sheets, if n	itional Articles, enter chai wcessary). (Be specific)	nge(s) here:		
	accessary). (The specific)			
N/A				
·				
	 	· · ·	••	
	•	-		
			·	
•				
		·		
	<u>-</u>			
F. If an amendment provides	for an exchange, reclassifi	cation, or cancellation	of issued shares.	
provisions for implementing	ng the amendment if not c	ontained in the amend	ment itself:	
(if not applicable, indic	rate NA)			
N/A				

The date of each amendment(s) ac	07/02/2018 loption:	, if other than t
date this document was signed.		
Effective date if applicable:	2/2018	
тиски и парражане.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved 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	(voting group)	
•	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
07/02/2018 Dated		
Signature		_
selected	irector, president or other officer — if directors or officers have not been d, by an incorporator — if in the hands of a receiver, trustee, or other court red fiduciary by that fiduciary)	
	RAQUEL RIVAS	
•	(Typed or printed name of person signing)	· · · · ·
	VICE-PRESIDENT	
	(Title of person signing)	