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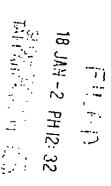
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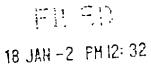
TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ICHI ONE, INC.			
DOCUMENT NUMB				
	f Amendment and fee are st	abmitted for filing.		
Please return all corresp	nondence concerning this ma	atter to the following:		
1	NIRIAM M PEREZ			
-		Name of Contact Pers	on	
1	NMP PROFESSIONAL SERVICES INC.			
-		Firm/ Company		
:	2500 SW 107 AVE STE 8			
Address				
:	MIAMI, FL 33165			
_		City/ State and Zip Co	de	
NMPP	ROFESSIONALS@BELLS	OUTH.NET		
	-	sed for future annual repo	rt notification)	
For further information	concerning this matter, pleas	se call;		
NIRIAM M PEREZ		305 at () 221-8176 ode & Daytime Telephone Number	
Name of	Contact Person	Area C	ode & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi P.O. I	ng Address dment Section ion of Corporations 30x 6327 nassee, FL 32314	Amer Divis Clifte	t Address Idment Section Ion of Corporations In Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to

to
Articles of Incorporation
of



ICHI	ONE.	INC.
		11.55

(Name o	of Corporation as currer	ntly filed with the Florida Dept. of State)
P99000105970		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ime of the corporation:	
N/A		The new
	nation "Corp." "Inc." or	ion," "campany," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address,	if applicables	N/A
(Principal office address MUST BE A S		
C. Enter new mailing address, if appl	icable:	N/A
(Mailing address MAY BE A POST)	OFFICE BOX)	10/4
D. If amending the registered agent an new registered agent and/or the new		
Name of New Registered Agent	JORGE E. MARIN	_
Name of New Registered Agent	3970 NW 27 ST	
		street address)
	MIAMI	331.12
New Registered Office Address:		, Florida
New Registered Agent's Signature, if c	hanging Registered Age	nt:
Thereby accept the appointment as regist	erea agent - 1 am jamilia A	r with and accept the obligations of the position
\underline{V}		12/28/2017
	Signature of New	Beeistered 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)

Example:

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 = Chairmon or Clerk; CEO = Chief Executive Officer; CEO = 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

X Change	<u>PT Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	<u>lly Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>V</u>	JUAN E. HINCAPIE	3970 NW 27 ST
Add X Remove			MIAMI, FL 33142
2) X Change	V	ANA M. MARIN	3970 NW 27 ST
Add			MIAMI, FL 33142
Remove 3) Change			
Add Remove			
4) Change			
Add			
Remove			
5) Change Add			
Remove			
6) Change			
Add Remove			

F. If an amondment 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 NA)	E. If amending or adding additional Art (Attach additional sheets, if necessary).	icies, enter enange(s) nere: (Be specific)
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
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(if not applicable, indicate N/A)	provisions for implementing the ame	namee, reclassification, or cancellation of issued snares, and ment if not contained in the amendment itself:
N/A	(if not applicable, indicate N/A)	
	N/A	
	<u> </u>	

	01/02/2018	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will bepartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were acaction was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated	1// valadaved	
select	director, president of other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	_
	JORGE E. MARIN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	