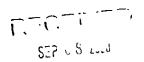
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TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Jaimer, Inc.			
DOCUMENT NUM				
	es of Amendment and fee are su	bmitted for filing.		
Please return all cor	respondence concerning this ma	itter to the following:		
	Dean S. Saul			
	Name of Contact Person			
	Jaimer, Inc.			
		Firm/ Company		
	2072 S. Military Trail Unit 8			
	Address			
	West Palm Beach, Florida 33415			
	City/ State and Zip Code			
	inmast@bellsouth.net			
	<u>`</u>	sed for future annual report	notification)	
For further informat Dean S. Saul	ion concerning this matter, plea		967-2112	
Name of Contact Person		at (at (Area Co) 967-2112 de & Daytime Telephone Number	
Enclosed is a check	for the following amount made			
□ \$35 Filing Fee	S43.75 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 Tallahussec, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

Jaim	er. INC.
(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 <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	75
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	1
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
Same of Sew registered agent	
tFlorida stre	
rr araa Me	er (tau) ess)
New Registered Office Address:	Florida
•	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
Thereby accept the appointment as registered agent. Tam familiar w	ith and accept the obligations of the position.
e:	- I I was the first transfer to the same of the same o
Mgnaure of New Re	gistered Agent, if changing
Check if applicable	
☐ 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)

Example:

Please note the officer/director title by the first letter of the office title:

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.

X Change	$\overline{b.L}$	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	D	Gary Hanson	2773 S. Ocean Blvd
Add			Unit 205
X Remove			Palm Beach, Florida 33480
2) Change	PSTD	Dean S. Saul	2072 S. Military Trail
X Add	-		Unit 8
Remove 3) Change	-1.		West Palm Beach, Florida 33415
Add			
Remove			
4) Change			
Add			
Remove			·
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Mtach <i>additional</i>	sheets, if necessary).	cles, enter change(s) h (Be specific)			
					
					
				- 	
				-	
					
·					
					
		· · · · · · · · · · · · · · · · · · ·			
<u>lf an amendment</u>	provides for an excl	ange, reclassification,	or cancellation of is	sued shares,	
provisions for in	<u>uplementing the ame</u>	ndment if not containe	ed in the amendmen	t itself:	
(if not applic	rable, indicate N/A)				
				- 	
				···	
					

The date of each amendment(s)	adoption:	if other than the
date this document was signed.		
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 requestrement of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors withou	it shareholder action and shareholder
■ The amendment(s) was/were a by the shareholders was/were	lopted by the shareholders. The number of votes east fo sufficient for approval.	r the amendment(s)
	proved by the shareholders through voting groups. The reach voting group entitled to vote separately on the ar	
"The number of votes ca	at for the amendment(s) was/were sufficient for approval	r
Gary Hanson		
177	(voting group)	
Septembe Dated Signature	GARY WHONSON	
(By a select	director, president or other officer – if directors or office ed, by an incorporator – if in the hands of a receiver, tru nted fiduciary by that fiduciary)	ers have not been stee, or other court
	Gary Hanson	
	(Typed or printed name of person signing)	
	Director	
	(Fitle of person signing)	