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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: IFA SOFTWARE	& MARKETING, CORP.	
DOCUMENT NUMB	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Timo A. Becker, Esq.		
•	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1
	Baur & Klein, P.A.		
•		Firm/ Company	
	100 North Biscayne Blvd., S	uite 2100	
•		Address	
	Miami, FL 33132		
•		City/ State and Zip Code	
aklein	@worldwidelaw.com		
	•	sed for future annual report	notification)
	E-mail address. (w oc us	sed to: intitie aminai teboir	ilounous/ii)
For further information	concerning this matter, pleas	se call:	
Timo A. Becker, Esq.		at (305	377-3561
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	urtment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address		Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
- -	shassee, FL 32314		xecutive Center Circle
			issee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	ntly filed with the Florida Dent. of State)	
V64497		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment	t(s) to
A. If amending name, enter the new name of the cornoration:	75	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	1819 SE 17th Street, #1206,	
(Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, FL 33316	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1819 SE 17th Street, #1206,	
	Fort Lauderdale, FL 33316	
		Li
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	dress in Florida, enter the name of the	HED I
Name of New Registered Agent	三十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二	
(Florida s	street address)	
· ·	·	
New Registered Office Address:	(City) Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	nt; with and accept the obligations of the position.	
Signature of New	Registered Agent, if changing	
	G	

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 = 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	PT	John Doe	
X Remove	¥	Mike Jones	
_X Add	<u>SY</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PCEO	CARSTEN BECKER	1819 SE 17th Street, # 1206
X Add			Fort Lauderdale, FL 33316
Remove			
2) Change	4	_	
Add			
Remove			
3) Change			
Add			
Remove		~	
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
Kanove			
6) Change		_	_
Add			
Remove			

ttach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	······································
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(an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:

	loption:	if other than
late 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 be document's effective date on the De	clock does not meet the applicable statutory filing requirements, this date we partment of State's records.	ill not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
11/09/2017	,	
Dated		
Signature ($\pi \setminus \Lambda_0 \setminus \Lambda$	
(B)	inected 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 ted fiduciary by that fiduciary)	
щроп	···	
	RAINER WAEDLICH	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	