N20 000000 9623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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CHISHOLM | LAW FIRM

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Orlando, Florida 32801
www.ChisholmFirm.com

August 2, 2021

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Subject: Articles of Incorporation

To Whom It May Concern:

Enclosed please find the original Articles of Incorporation ("Articles") along with trust account check no. 124876305 made payable to the Florida Department of State in the amount of $70 in order to defray your filing fee for the Articles of Incorporation filed on behalf of Dra`ive.

If you should have any questions, please feel free to contact me at 407.674.2657

Sincerely,

David Famuyide
Enclosures Articles of Incorporation (original)
Trust Account Check

Articles of Amendment
to
Articles of Incorporation
of

DRA'IVE CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

N20000009623

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this ***Florida Not For Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

A. **If amending name, enter the new name of the corporation:**

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. **Enter new principal office address, if applicable:**
(Principal office address MUST BE A STREET ADDRESS)

1314 E Las Olas Blvd #1848
Fort Lauderdale FL 33301

C. **Enter new mailing address, if applicable:**
(Mailing address MAY BE A POST OFFICE BOX)

1314 E Las Olas Blvd #1848
Fort Lauderdale FL 33301

D. **If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent: Michelle Antoinette Duclos

1314 E Las Olas Blvd #1848
(Florida street address)

New Registered Office Address:

Fort Lauderdale, Florida 33301
(City) *(Zip Code)*

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Duclos Michelle
Signature of New Registered Agent, if changing

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 7/21/2021

Signature _____
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Michelle Antoinette Duclos
(Typed or printed name of person signing)

President
(Title of person signing)