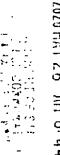
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JUN 11 2020 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: A2Z INVESTIGA	TIONS FLORIDA, INC.				
DOCUMENT NUME						
	of Amendment and fee are su	bmitted for tiling.				
Please return all corres	pondence concerning this ma	tter to the following:				
	DIANE CONRAD					
		Name of Contact Person	1			
TAX SAVERS OF AMERICA, INC.						
		Firm/ Company				
	3465 BONITA BEACH RD.	• -				
		Address				
	BONITA SPRINGS, FLORI	DA 34134				
		City/ State and Zip Cod	· ·			
TAXS	SAVERS@EMBARQMAIL.	COM				
	=	sed for future annual report	notification)			
		·				
for further information	concerning this matter, pleas	se call:				
DIANE CONRAD		239	947-1284			
Name c	of Contact Person	at (239) 947-1284 Area Code & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:			
S35 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)			
Ame Divi: P.O.	hing Address Indiment Section Ission of Corporations Isso 6327 Ishassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

٠	17	187	17	- C -	1173	1	227	NIC	171	ORIDA	INIC
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AZZ INVESTIGATIONS PEOKIDA, INC.					
	ntly filed with the Florida Dept. of Stat	<u>(e)</u>			
P0000012704					
(Document Number	of Corporation (if known)				
Pursuant to the provisions of section 607.1006. Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the	following amendm	ent(s) to		
A. If amending name, enter the new name of the corporation:					
A2Z INVESTIGATIONS SERVICES, INC.		The nev			
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation na	or the abbreviation	n		
B. Enter new principal office address, if applicable:	N/A				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		297			
	-		-7'3		
			و ۱ سیسر محدد		
C. Enter new mailing address, if applicable:	N/4	26	हे इस्तुम्ब		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A	1111	111		
		<u> </u>			
		·			
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre					
Name of New Registered Agent					
					
(Florida :	street addressi				
N:/A					
New Registered Office Address:	Florida	(Zip Code)			
		•			
New Registered Agent's Signature, if changing Registered Agen					
I hereby accept the appointment as registered agent – I am familia	r with and accept the obligations of the f	position			
Signature of New	Registered 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)

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 <math>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: <u>X</u> Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	\underline{V}	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sm	rith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		 N/A
Add				
Remove				
2) Change			**************************************	
Add				
Remove				
3) Change		_		
Add				
Remove				.
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

F. If an amendment 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 N/4) N/A	
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)	
N'A	
	• •

The date of each amendment(s) adoption:, if other the	an the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(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 document's effective date on the Department of State's records.	as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 5-23-2020	
Signature Jan O Jan	
(By a director, president or other officer officers or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
LAWRENCE O'LEARY	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	