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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: SAFE	E HAVEN SECU	JRITIES I	NC.	
DOCUMENT NUMBE	ER:	P18000045446	<u>.</u>		
The enclosed Articles of	f Amendment and fee are su	abmitted for filing	<b>,</b>		
Please return all corresp	ondence concerning this ma	tter to the followi	ing:		
		DEBRA EDMO	ONDS		
_	Name of Contact Person				
	SAFE HAVEN SECURITIES INC.			INC.	
_		Firm/ Co	mpany		
	1084 V	ISTA HAVEN C	IR SUITI	E 202	
		Addre	ess	<del></del>	
	OI	RLANDO FLOR	IDA 3282	25	
		City/ State and	d Zip Cod	e	
	de	braodellat810@	aol.com		
	E-mail address: (to be u	_		notification)	
	concerning this matter, pleas		321	356-6748	
Name of	Contact Person	at (	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Flo			
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filin Certified Co (Additional c enclosed)	ру	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ng Address			Address	
	dment Section		Amendment Section		
Division of Corporations  Division of Corporations					
P.O. Box 6327 Clifton Building			-		
Tallahassee, FL 32314			2001 5	Executive Center Circle	

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

SAFE HAVEN SECURITIES	INC.	
(Name of Corporat	tion as currently filed with the Flor	ida Dept. of State)
P18000045446		
(Docu	ment Number of Corporation (if known	<b>w</b> п)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this <i>Florida Profit Corpo</i>	pration adopts the following amendment(s)
A. If amending name, enter the new name of the c	corporation:	
		The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Cor, word "chartered," "professional association," or the	p," "Inc," or "Co". A professiona	"incorporated" or the abbreviation
B. Enter new principal office address, if applicable	le:	
(Principal office address <u>MUST BE A STREET AD</u>		200 A
	<del></del>	
		- 二二二
C. Enter new mailing address, if applicable:		Min on E
(Mailing address MAY BE A POST OFFICE B	<u>ox</u> )	<u> </u>
		50 05
	<del></del>	The state of the s
D. If amending the registered agent and/or registe	ered office address in Florida, ente	r th <u>e name</u> of the
new registered agent and/or the new registered		<del></del>
Name of New Registered Agent		
	(Florida street address)	
	(2 ) Or said (1) (C) book carry	
New Registered Office Address:	(Cia.)	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re	gistered Agent:	
I hereby accept the appointment as registered agent.		bligations of the position.
Sio	nature of New Registered Agent if cl	hanoina

## 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 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</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	\$	JUDITHANN COBB MCKNIGHT	253 HAWTHORNE GROVE BL\
Add			APT 104
X Remove			ORLANDO FLORIDA 32835
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	_		
Add			
KCHOVC			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	
N/A	
<del>.</del>	<u> </u>
	<del></del>
	<u></u>
	_
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/A)	
N/A	
	<del></del> -
	· · · · · · · · · · · · · · · · · · ·

• • •	JULY 13, 2018	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Figs. At a discription of the bill.	JULY 13, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date,	)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ame	endment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The followin each voting group entitled to vote separately on the amendment	ng statement nt(s):
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and s	hareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and sharel	holder
JUL Dated	Y 13, 2018	
Signature	ebra Edmondo	
· · · · · · · · · · · · · · · · · · ·	rector, president or other officer - if directors or officers have	
	d, by an incorporator – if in the hands of a receiver, trustee, or o	other court
appoint	ed fiduciary by that fiduciary)	
	DEBRA EDMONDS	
	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·

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