P190000 46086

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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: 2FLYERDESIGN INC DOCUMENT NUMBER: P19000046086 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LEOSBEL DURANONA LOPEZ Name of Contact Person 2FLYERDESIGN INC Firm/ Company 558 Green Springs Place Address West Palm Beach, FL 33409 City/ State and Zip Code 2flyerdesign@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786) 312-6767

Area Code & Daytime Telephone Number LEOSBEL DURANONA LOPEZ Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations**

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

2FLYERDESIGN INC				
(Name	of Corporation as current	ly filed with the Florida Dept. of State)		
P19000046086				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following	ng amendmer	nt(s) to
A. If amending name, enter the new na	ıme of the corporation:			
			The new	
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the c "Co". A professional corporation name must "PA."	hbreviation	
D. Enter pay principal office address	if applicable:	LEOSBEL DURANONA LOPEZ		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		558 Green Springs Place		
		West Palm Beach, FL 33409		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		558 Green Springs Place		100
		West Palm Beach, FL 33409	Office ALL	
				<u>~</u>
D. If amending the registered agent an new registered agent and/or the new			SSE	PM 12: 08
Name of New Registered Agent LEOSBEL DURANONA		LOPEZ		0
Nume of New Registered Agem	558 Green Springs Place		– t.::	~
		reet address)	_	
	West Palm Beach 33409			
New Registered Office Address:		, Florida	Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		t: with and accept the obligations of the position.		
	<u> </u>			
	11/2		_	
	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 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: X Change	<u>PT</u>	John Do	<u>>e</u>	
X Remove	¥	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally St	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) X Change	PT		LEOSBEL DURANONA LOPEZ	558 Green Springs Place
Add	 -			West Palm Beach, FL 33409
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	<u> </u>
	,
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	-

	06/14/2019	
The date of each amendment date this document was signed		if other than th
re	06/14/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment	file date)
	this block does not meet the applicable statutory filing red ne Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we by the shareholders was/we	e adopted by the shareholders. The number of votes cast for sufficient for approval.	or the amendment(s)
	e approved by the shareholders through voting groups. The d for each voting group entitled to vote separately on the a	
"The number of votes	cast for the amendment(s) was/were sufficient for approva	I
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/well action was not required.	e adopted by the board of directors without shareholder act	ion and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action a	und shareholder
06/14	72019	
Dated	. , , , ,	
Signature _	4/-/	
Signature	y a director, president or other officer – if directors or offic	ers have not been
St	lected, by an incorporator - if in the hands of a receiver, tru	
ар	pointed fiduciary by that fiduciary)	
	LEOSBEL DURANONA LOPEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	