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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN BLACK BIZ VOLUSIA, INC.

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Articles of Amendment to Articles of Incorporation of

BLACK BIZ VOLUSIA, INC.		
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
N23000001359		
	Number of Corporation (if know	vn)
Pursuant to the provisions of section 617 1006, Florida amendment(s) to its Articles of Incorporation	Statutes, this Florida Not For I	Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	<u>poration:</u>	
Black Biz Florida, Inc.		The new
name must be distinguishable and contain the word "co "Company" or "Co," may not be used in the name.	rporation" or "incorporated".	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		20
(Principal office address <u>MUST BE A STREET ADDI</u>	<u>(ESS</u>)	0231:12 21
		21
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	7	
	· -	ე: 0
 If amending the registered agent and/or registered new registered agent and/or the new registered or 		ster the name of the
	<u> </u>	
Name of New Registered Agent:		-1.
	Œ lan	da stree: addressi
New Registered Office Address	7 10/11	and all the manner of the
		Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regis	tered Agent:	
I hereby accept the appointment as registered agent. I		obligations of the position.
<u></u>		
	Signature of New Registere	d Agent, if changing

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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 X Remove X Add	PT John De V Mike Je SV Salty St	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove 2) Change Add			2023 15.8 21
Remove 3) Change Add Remove			000
4) Change Add			
Remove 51 Change Add			
Remove Change Add			
E. If amending or addin (attach additional shee		icles, enter change(s) here. (Be specific)	

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.

(CHECK ONE)

 \Box The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

Adoption of Amendment(s)

was/were sufficient for approval

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There are no adopted by t	members or members entitled to vote on the amendment(s). The amendment(s) was/were he board of directors.
Dat	ed 03/07/2023
5iછ	(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)
	(Typed or printed usine of prison signing)
	(Title of person signing)