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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: | Ciroup, Inc. |
|---|---|
| N24000002196 | |
| DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fee a | are submitted for filing. |
| Please return all correspondence concerning th | is matter to the following: |
| Shermon Gordon | |
| | (Name of Contact Person) |
| Elite Athletic Group, Inc | |
| | (Firm/ Company) |
| 2355 SW 28th Street 40C | |
| | (Address) |
| Okeechobee, FL 34974 | |
| | (City/ State and Zip Code) |
| eliteathleticgroupinc@gmail.com | |
| E-mail address: (to) | be used for future annual report notification) |
| For further information concerning this matter, | please call: |
| Shermon Gordon | 469-866-7825 |
| (Name of Contact | Person) at(Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount n | nade payable to the Florida Department of State: |
| ■ \$35 Filing Fee □\$43.75 Filing F Certificate of S | tatus Certified Copy Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is Enclosed) |
| Mailing Address Amendment Section | Street Address Amendment Section |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| Elite Athletic Group, Inc | | |
|---|-------------------------------------|---|
| (Name of Corporation as currently filed with th | e Florida Dept. of State) | |
| N24000002196 | | |
| (Docum | ment Number of Corporation (if k | nown) |
| Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation: | orida Statutes, this Florida Not Fo | r Profit Corporation adopts the following |
| A. If amending name, enter the new name of th | e corporation: | |
| N/A | | The new |
| name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam | | |
| B. Enter new principal office address, if application | N/A | |
| (Principal office address MUST BE A STREET A | | |
| | | · · · · · · · · · · · · · · · · · · · |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | <i>BOX</i>) N/A | |
| | | |
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| | - | |
| If amending the registered agent and/or registered agent and/or the new registered. | | enter the name of the |
| | N/A | |
| Name of New Registered Agent: | | |
| | N/A | - |
| New Registered Office Address | | orida street address) |
| | N/A | n I N/A |
| | (Citv) | , Florida (Zip Code) |
| | • | , , |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered ager | | the obligations of the position. |
| . , , , , | , | , |
| | | |
| - | Signature of New Regist | ered 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 X Remove X Add | PT John Do V Mike Jo SV Sally Si | <u>ones</u> | |
|--|--|---|---|
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add | <u>VP</u> | Matthew Fairchild | 2355 SW 28th Street 40C Okeechobee, FL 34974 |
| x Remove | | | |
| 2) Change Add | SECR | Kendra Fairchild | 2355 SW 28th Street 40C Okeechobee, FL 34974 |
| X Remove 3) Change Add Remove | | | |
| 4) Change Add | angang P ilanggang dang P ilang | | |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |
| E. If amending or addin (attach additional shee | | cles, enter change(s) here: (Be specific) | |
| IVA | | | |
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| The date of each amendment(s) as | doption: | , 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 blo document's effective date on the Do | ock does not meet the applicable statutory filing requirements, this date epartment of State's records. | e will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were a was/were sufficient for approv | dopted by the members and the number of votes cast for the amendme | ent(s) |

| Dated | 4/21/2024 |
|-----------|---|
| | |
| Signature | |
| | By the chairman or vice chairman of the board, president or other officer-if director |
| | have not been selected, by an incorporator – if in the hands of a receiver, trustee, or |
| | other court appointed fiduciary by that fiduciary) |
| | Shermon Gordon |
| | (Typed or printed name of person signing) |
| | |
| | |