P0000011284

(Re	equestor's Name)	<u> </u>
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Tangleview, Inc.				
DOCUMENT NUM	BER: P00000112864				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Daniel Stuzin				
	 -	Name of Contact Persor			
	Tangleview, Inc.				
		Firm/ Company			
	6303 Blue Lagoon Drive Ste 350				
	Address				
	Miami, Fl 33126				
		City/ State and Zip Cod	ਦ		
sfpar	tnersine@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Cary Blanco		at (305	de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, F1, 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

TANGLEVIEW, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P00000112864 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Florida street address)

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> <u>Jo</u>	<u>hn Doe</u>	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	PT	Charles B. Stuzin	6303 Blue Lagoon Drive
Add			Ste 350
Remove			Miami, Fl 33126
2) Change	PT	Daniel M. Stuzin	6303 Blue Lagoon Drive
XAdd			Ste 350
Remove			Miami, Fl 33126
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
, Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here:
	(ne sheethe)
N/A	
_	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
N/A	

	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 I document's effective date on the Do	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes east for the amendmentificient for approval.	t(s)
	proved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ad- action was not required.	opted by the board of directors without shareholder action and shareholder	der
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
6/5/18 Dated		
Signature (By a c	lirector, president of the officer – if directors or officers have not bee	n
	d, by an incorporator – if in the hands of a receiver, trustee, or other cotted fiduciary by that (iduciary)	uri
	Daniel M. Stuzin	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	