# P02000125815

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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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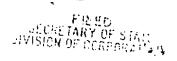


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# **COVER LETTER**

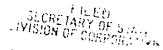
TO: Amendment Section Division of Corporations

NAME OF CORPOR	- ·/ - / /	up, Inc			
	of Amendment and fee are su				
Please return all corres	pondence concerning this ma	tter to the following:			
-	Sharl	VN Lauby Name of Contact Person	n.		
	ITM G	MUP INC.	·		
-	5745	5 SW 75 S	street #294		
	gaine	Address  SVILE TO S  City/ State and Zip Cod	32608		
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Shark	IN Lauby Contact Person	at ( 95+	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
☐ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Marit	ing Address	C*4	Address		

### Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



## Articles of Amendment to Articles of Incorporation of

2018 JUL -9 AM 11: 45

ITM Group, Inc				
(Name of Corporation as currently filed with the Florida Dept. of State)				
P62.666125815				
(Document Number of Corporation (if known)				
Pursuant to the provisions of section 607,1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:				
A. If amending name, enter the new name of the corporation:				
n/a_	The man			
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)	5745 SW 75 Street #294 Gainesville Fil 32608			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5745 SW 75 Street #294 Gamesville FL 32608			
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 Sharlyn 5745 SW (Florida stre	Joby (Same) 75 Street #294			
New Registered Office Address: Gavnes VI 1	Cuy) . Florida <u>32608</u> (Zap Code)			
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registerest agent. I am familiar with and accept the obligations of the position.				
/ Dalle And The Co				

# 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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
I) X Change	P	Sharlyn Lauby	5745 SW 75 Street
Add		,	#294
Remove			gainesville FI 32608
2) Change		Keith Lauby	5745 SW 75 Street
Add			9ainerille FL 32608
3) Change			<u> </u>
Add			
Remove			
4) Change		<del></del>	
Add			
Remove			
5) Change		_	
Add			
Remove			<del></del>
6)Change			
Add			
Remove			

<mark>lf amending or adding additional Art</mark> Attach <i>additional sheets, if necessary</i> ).	. (Be specific)
/	
	,
/	
f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y noi appacame, maictie wA)	
,,	
	V 8 11 FM

The date of each amendment(s) adoption:	, if other than the
date this document was signed.  Effective date if applicable: 4 444 20	18
(no more than 90 da	vs after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes east for the amendment(s) was/were su	Ticient for approval
by	·
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors with action was not required.	out shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
Dated 5 July 2018	) (
Signature / Dully	
(By a director, president or other officer - selected, by an incorporator - if in the hair	
appointed fiduciary by that fiduciary)	ids of represented, trustee, of other count
Sharlin	auhu
(Typed or printed name	of person signing)
- President	
(Title of pe	rson signing)