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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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TECHROEDER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Provets Group Inc		
	P03000027531		
DOCUMENT NUM	BEK:		·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Darren Woods		
		Name of Contact Person	n
	Provets Group Inc.		
		Firm/ Company	
	754 Summer Oaks Court		
	Z)-1-4 IT 12775	Address	
	Oviedo, Fl. 32765	**	
		City/ State and Zip Code	e e
darre	n.woods@provetsgroup.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Darren Woods		407	383-8531
Name	of Contact Person	at (Area Co) de & Daytime Telephone Number
			•
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment 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)
	iling Address		Address
Amendment Section		Amendment Section Division of Corporations	
	Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314			Executive Center Circle
		Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

Provets Group Inc.				
(Name of Corporation as currently fi	led with the Florida Dept. of State)			
(Document Number of C	orporation (if known)			
Pursuant to the provisions of section 607,1006, Florida Statutes, this Fla its Articles of Incorporation:	•	llowing :	ımendı	nent(s) to
A. If amending name, enter the new name of the corporation:				
			he ne	
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.:	". A professional corporation name	the abb must co	reviatio ntain ti	on he
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)				
C. Enter new mailing address, if applicable:)r		-
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>		- NON 61	. <u></u>
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the		\$# 9:	<u> </u>
Name of New Registered Agent			•	
(Florida street	address)			
New Registered Office Address:	. Florida			
(Ci	(y)	(Zip Coe	de)	•
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the pos	ition.		
Signature of New Regi	stered 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> <u>John</u>	<u>Doc</u>	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	Anna Woods	754 Summer Oaks Ct
Add			OVied FL 32765
Remove			
2) Change	Presider.	Darren Woods	754 Symmer Caks Ct OVINDA, FL 32765
Add			OVindo, FL 32765
Remove			
3) Change			
Add			
Remove			- Woy
4) Change			
Add			To the state of th
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			Mark Transfer of the Control of the
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	==
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	19 11:
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	707 - 4
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The date of each amendment(s) adoption:date this document was signed.	_, if other	than the
Effective date if applicable: NOVEMBE 19 2019 (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 document's effective date on the Department of State's records.	not be liste	d as the
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.		
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):		
"The number of votes cast for the amendment(s) was/were sufficient for approval		
by	19 NOV	~ r.
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	, <u>†</u>	- <u>- </u>
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.		J
Dated October 25m, 2016	··	
(By a director, president or other officer – if directors or officers 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 name of person signing)		
Director Vice President		
(Title of person signing)		