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I. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Thank You God M	ulti Services and 99 store,II	NC	
DOCUMENT NUMB	ER:			
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	Filiasse Kernizan			
-		Name of Contact Person	1	
	Thank You God Multi Servic	es and 99 store,INC		
-		Firm/ Company		
	12304 NW 7th Avenue			
		Address		
	North Miami Florida 33168			
		City/ State and Zip Code	:	
	St			
tica8(c)hotmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
François J Geneus		at (528-7729 de & Daytime Telephone Number	
Name o	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Thank you God Multi Services and 99 Store, INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P03000031519	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
THANK YOU GOD MULTI SERVICES,INC	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	SAME ADDRESS
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME ADDRESS
(Malling duaress MAI BE A 1 051 OF FICE BOX)	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	eet address)
New Registered Office Address:	Florida
	(City) $\triangleright C$ (Zine Code)
	CO m
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
Signature of New R	egistered Agent, if changing
Signature of New I	camered recinity onunging

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
, Add			
Remove			
			
5) Change			
Add			
Remove			
6) Change			
Add			
Aud Remove			

(Attach addition	or adding addition on all sheets, if necessity	essary). (Be sp	ecific)			
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lf an amendr	nent provides for or implementing	r an exchange, r	eclassification,	or cancellation :	of issued shares,	
(if not a	or implementing pplicable, indicat	e N/A)	ii not conta <u>ine</u>	u in the amenui	ment nisen.	
(5	· · · · · · · · · · · · · · · · · · ·	,				
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The date of each amend	ment(s) adoption:, if other than the
late this document was s	igned.
Effective date if applica	<u>ble</u> :
	(no more than 90 days after amendment file date)
	ed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the con the Department of State's records.
Adoption of Amendmer	ot(s) (<u>CHECK ONE</u>)
	as/were adopted by the shareholders. The number of votes cast for the amendment(s) vas/were sufficient for approval.
☐ The amendment(s) we must be separately per	as/were approved by the shareholders through voting groups. The following statement rovided 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	(voting group)
,	(voting group)
☐ The amendment(s) w action was not require	as/were adopted by the board of directors without shareholder action and shareholder ed.
☐ The amendment(s) w action was not require	as/were adopted by the incorporators without shareholder action and shareholder ed.
	02/10/2017
Dated	
g:	(dinse formers
Signat	(By a director, president or other officer – if directors of officers have not been
	selected, by an incorporator - if in the hands of a receiver, trustee, or other court
	appointed fiduciary by that fiduciary)
	FILIASSE KERNIZAN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

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