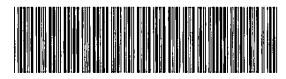
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: North Floridal Agents Network, Inc. DOCUMENT NUMBER: P03000061329 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Vanessa Vaughn Name of Contact Person North Florida Agents Network, Inc. Firm/ Company 2609 Farragut Way Address Tallahassee, FL 32312 City/ State and Zip Code vanessa@nfanflorida.com E-mail address: (to be used for future annual report notification) For further information concerning this matter! please call: at (850) 545-7022

Area Code & Daytime Telephone Number Vanessa Vaughn Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □S43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

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North Florida Agents Network, Inc.		THE ANALYSIS OF THE P
(Name o	of Corporation as curre	ently filed with the Florida Dept. of State)
P03000061329		
	(Document Numbe	er of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	 ame of the corporation	
N/A	T'	
	action "Corp," "Inc," o	
B. Enter new principal office address,		N/A
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST C		N/A
D. If amending the registered agent an new registered agent and/or the new	w registered office addr	address in Florida, enter the name of the ress:
Name of New Registered Agent	N/AI II	
	Į.	
	(Florida	a street address)
	1342 Timberlane Rd #2	
New Registered Office Address:		(City) (Zip Code)
New Registered Agent's Signature, if cl	 	ent:
		iar with and accept the obligations of the position.
	Signature of New	w Registered Agent, if changing

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V= Vice I Executive Officer; CFO = held. President, Treasurer Changes should be noted a change, Mike Jones lear Mike Jones, V as Remove.	ind/or D if necess rector title resident chief F r, Directo in the fol ves the co	irector being ary) The by the first The Treasu The	g added:	eer/director being removed and title, name, and = Trustee; C = Chairman or Clerk; CEO = Chief re than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is use should be noted as John Doe, PT as a Change.
Example: X Change	<u>PT</u>	John Doe	1	
X Remove	$\underline{\mathbf{V}}$	Mike Jone:	<u>\$</u>	
<u>X</u> Add	<u>\$V</u>	Sally Smiti	<u>h</u> 	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	dme	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add			1	
Remove			ı	
3) Change		_	<u>:</u>	
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Remove				
4) Change				
Add				
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5) Change		_ <u> </u>	<u>:</u>	
Add				
Remove			1	
6) Change				

____ Add

__ Remove

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
(Attach additional sneets, if necessary).	the specific)
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	1
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares, diment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ament it not contained in the amenament itself:
(y ma approxime, material mat)	
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The date of each amendment(s) adoption:
Effective date if applicable: (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 not be listed as the document's effective date on the Department of State's records.
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
(voling group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
9/1/2017 Dated
Signature Aresse and
(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)
Vanessa Vaughn
(Typed or printed name of person signing)
VP/CFO
(Title of person signing)