P0460000 4416

(Re	questor's Name)	
(,,,	,	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
·		
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

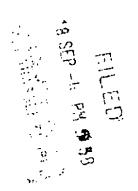
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: GRQ Consultants	s Inc	
DOCUMENT NUM	1BER: P04000004416		
	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	Barry Honig		
		Name of Contact Person	1
	GRQ Consultants Inc		
		Firm/ Company	
	215 SE Spanish Trail		
		Address	
	Boca Raton FL 33432		
		City/ State and Zip Cod-	e e
brh	onig@aol.com		
	· ·	sed for future annual report	notification)
For further informati	ion concerning this matter, pleas	561	302-2287
	e of Contact Person	at () de & Daytime Telephone Number
·	for the following amount made		
■ \$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)
Ai Di Pa	nendment Section vision of Corporations O. Box 6327 dlahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	
1 4			issee, FL 32301

Articles of Amendment to Articles of Incorporation of

	•	of				
GRQ Consultants, Inc.						
(Name	of Corporation as curren	ntly filed with the Florida Dep	t. of State)			
P04000004416						
<u> </u>	(Document Number	of Corporation (if known)				·
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation a	dopts the fo	llowing ar	nendine	ent(s) to
A. If amending name, enter the new na	ame of the corporation:					
				771	e new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	atton "Corp," "Inc," or	"Co". A professional corpore				
B. Enter new principal office address,	if applicable:	215 SE Spanish Trail				
(Principal office address MUST BE A STREET ADDRESS)		Boca Raton FL 33432			ક	
					ci	1
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)		215 SE Spanish Trail			고	ED.
		Boca Raton FL 33432		:	₩	
			•	. යා 		
D. If amending the registered agent an new registered agent and/or the new			ne of the			
Name of New Registered Agent	Barry Honig					
	215 SE Spanish Trail					
	(Florida street address)					
New Registered Office Address:	Boca Raton		33432 , Florida			
	(City)		(Zip Code)			
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Age tered agent. I am familia	nt: r with and accept the obligation	s of the pos	ition.		

Signature of New Registered 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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Barry Honig	215 SE Spanish Trail
Add			Boca Raton FL 33432
Кепюче			
2) Change			
Add			
Remove			·
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5/ Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary)	ticles, enter change(s) here: (Be specific)	
		_
If an amendment provides for an excl	change, 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:	
THE HOLD MICHIGAL CONTRACTOR SPECIAL		
(g an apparate, mariae 1971)		
(g (qq (1921)		
(y 100 (qq.11 (0.11)		
(y ma span ant, man de 1921)		
(y ma span art, man at 1921)		
(y ma sygmant, man at 1921)		
(y ma span art, man ac 1921)		
(y ma sygmant, man ac 1921)		

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	ne 1, 2018	
Effective date <u>if applicable:</u>		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as by the shareholders was were:	dopted by the shareholders. The number of votes east for the amendment(sufficient for approval.	N)
☐ The amendment(s) was/were a must be separately provided fi	oproved by the shareholders through voting groups. The tollowing statem or each voting group catitled to vote separately on the amendment(s):	vnt
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	<u>,</u>	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and sharehold	cı
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
August 3 Dated		
	11 —	
selec	director president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	Barry Honig	
	(Typed or printed name of person signing)	
	President/Sole Owner	
	(Title of person signing)	