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| Special Instructions to | Filing Officer:      |          |
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R. WHITE FEB 18 2020

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORA           | ATION: <u>Award</u>                         | s Pro INC   |  |
|---------------------------|---|---|--|
| DOCUMENT NUMBI            | ation: <u>Award</u><br>er: <u>Poyt</u>      | 000 141829  |  |
| The enclosed Articles of  | f Amendment and fee are st                  | abmitted for filing.  |  |
| Please return all corresp | ondence concerning this ma                  | atter to the following:   |  |
|                           | March Lie                                   |   |  |
| _                         | 11044 146                                   | W CC th   |  |
|                           | _   | Name of Contact Person  | n  |
|                           | Awards                                      | Pro lac   |  |
| _                         | 7-7   | Firm/ Company   |  |
|                           | 11474                                       | W Sample  | Rd   |
| _                         | <del></del>                                 | Address   |  |
|                           | Coral                                       | Spring  | 1-L 33065  |
| _                         | *,-   | City/ State and Zip Cod   | c  |
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|                           | bramsan                                     | ak & ant. 1   | <del>(</del>   |
| _                         | E-mail address: (to be us                   | sed for future annual report                                      | notification)  |
| For further information   | concerning this matter, plea                | se call:  |  |
|                           | concerning this matter, pied                | oc cuit.  |  |
| Moza                      | _ Lyew                                      | at ( 954  | de & Daytime Telephone Number  |
| Name of                   | Contact Person                              | Area Co   | de & Daytime Telephone Number  |
|                           | 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) |
|                           | ng Address                                  | Street  | Address  |
| Amen                      | dment Section                               | Amend   | Iment Section  |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation

of

| Awards  | 120                | INC                 | 225 C 20 11   |
|---|--------------------|---------------------|---|
|   | ( <u>Name of C</u> | _                   | rently filed with the Florida Dept. of State) 9:30  |
|   |                    |                     | 1000 141829<br>nber of Corporation (if known)   |
|   |                    | (170cument rum      | ioer of Corporation (it known)  |
| Pursuant to the provisions of its Articles of Incorporation:                                | section 607,100    | 6, Florida Statutes | , this Florida Profit Corporation adopts the following amendment(s)                                     |
| A. If amending name, enter  | r the new name     | of the corporation  | <u>on:</u>  |
|   | PLUS               |                     | The new   |
| name must be distinguishable<br>"Inc.," or Co.," or the des<br>"chartered," "professional a | ignation "Corp     | o, " "Inc," or "Co  |   |
| B. <u>Enter new principal offi</u><br>(Principal office address <u>MU</u>                   |                    |                     | 11474 W. Sample Rd<br>Coral Springs FL 33065  |
| C. Enter new mailing addi<br>(Mailing address MAY B   |                    |                     | 11474 Mest Sample Rd<br>Coral Springs FL 33065  |
| D. If amending the register new registered agent an   |                    |                     | e address in Florida, enter the name of the dress:  |
| Name of New Regist  |                    | <u>Bal Rav</u>      |   |
|   |                    | 1779 N              | IN 9/55 Ave C.3 FL 33071  |
| <u>New Registered Offic</u>   | ce Address:        | Corul Spr           | 1W 9/57 AVE C. 5 FL 33071  ida street address) 1779 NW 9/57 AVE  1/19  (City) Florida 3307 ( (Zip Code) |
| New Registered Agent's Sig  | nature, if chan    | ging Registered A   | Agent:  |
| I hereby accept the appointm  | ent as registered  | l agent. I am fam   | iliar with and accept the obligations of the position.  |
| ∠   | Sal R              | ans rical           | very Registered Agent, if changing  |
|   |                    | — signature of t    | кем кедімегей адені, у снандінд   |

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

| X Change                      | <u>PT</u>    | John Doe    |                 |
|-------------------------------|--------------|-------------|-----------------|
| X Remove                      | <u>V</u>     | Mike Jones  |                 |
| X Add                         | <u>SV</u>    | Sally Smith |                 |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change                     |              |             |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 2) Change                     |              |             |                 |
| Add                           |              |             |                 |
| Remove 3) Change              |              | _           |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 4)Change                      |              | <del></del> |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 5) Change                     |              |             |                 |
| Add                           |              | _           |                 |
| Remove                        |              |             |                 |
| 6) Change                     |              |             |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |

| Attach <i>additional</i> | dding additional Articles, enter chan sheets, if necessary). (Be specific)    |                          |  |             |
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| an amenamen              | provides for an exchange, reclassific<br>applementing the amendment if not co | ation, or cancellation o | I issued shares,                       |             |
| (if not appli            | cable, indicate N/A)  | miamed in the amenum     | iem nsen:                              |             |
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| The date of each amendment(s) adoption:date this document was signed.   | • •   | , if other than the                 |
|---|---|-------------------------------------|
| Effective date <u>if applicable</u> : (no m   | Ol/18/2620<br>nore than 90 days after amendment file dates  |                                     |
| Note: If the date inserted in this block does not meet document's effective date on the Department of State's |   | this date will not be listed as the |
| Adoption of Amendment(s) (CHECK (   | ONE)  |                                     |
| The amendment(s) was/were adopted by the incorporation was not required.                                      | orators, or board of directors without sharehold  | er action and shareholder           |
| ☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approva                       |   | lment(s)                            |
| ☐ The amendment(s) was/were approved by the sharel must be separately provided for each voting group          |   |                                     |
| "The number of votes cast for the amendment   | i(s) was/were sufficient for approval   |                                     |
| by(voting gro   | ···   |                                     |
| Signature  (By a director, president or selected, by an incorporate appointed fiduciary by that  Moya  (Typed | r other officer – if directors or officers have not or – if in the hands of a receiver, trustee, or other fiduciary)  Lyew or printed name of person signing) | been<br>er court                    |
| (Title of   | ( text   f person signing)  | <u>.</u>                            |