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10C/Amend

TALLAHASSEE, FLORIDA

12-JUL-2 PM 4: 28

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ENR MULT	TI SERVICES IN	IC
DOCUMENT NUMBER: P0600002255		
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this ma	atter to the following:	
EDDY RIARD		
ENR MULTI SER	Name of Contact Person	n
2481 NW 40TH A	Firm/ Company	
LAUDERHILL FL	Address . 33313	
	City/ State and Zip Cod	e
ecole1836@hotmail. E-mail address: (to be us	com sed for future annual report	notification)
For further information concerning this matter, please	se call:	
Eddy Riard	at (954	, 484 5674
Name of Contact Person		de & 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 & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

(Zip Code)

ENR MULTISERVICES INC

12 JUL -2 PH 4: 28 (Name of Corporation as currently filed with the Florida Dept. of State) P06000022555 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: ENR GROUP FINANCIAL INC.. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 2481 N STATE RD 7 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) LAUDERHILL FL 33313 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida

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 position.

Signature of New Registered Agent, if changing

(Citv)

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)	Title	<u>Name</u>	<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 Remove			

(attach additional sheets, if necessary).	cles, enter chan (Be specific)				
		<u></u>	, <u> </u>		
		<u> </u>			
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		<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>		
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification	cation, or canco	ellation of issued amendment itse	shares, elf:	

The date of each amendment(s) adoption: U6/2//2U12			
Effective date if applicable:	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were as by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.		
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):		
	st for the amendment(s) was/were sufficient for approval		
by	(voting group)		
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareholder		
☐ The amendment(s) was/were accation was not required.	dopted by the incorporators without shareholder action and shareholder		
Dated 07/01	/2012 //		
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court med fiduciary by that fiduciary)		
	EDDY RIARD		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		