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COR AMND/RESTATE/CORRECT OR O/D RESIGN

AMERICAN BENEFIT PLAN, INC.

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: /	MERICAN BENEFIT PLAN, INC.		
DOCUMEN.	F NUMBER: P06000128383		
	Articles of Amendment and fee are s	ubmitted for filing.	
Please return	all correspondence concerning this m	atter to the following:	•
	Katie Lee		
	(Namo	of Person)	
-	Legeizogm,com, inc. (Name of Fi	rm/ Company)	
	7083 Hollywood Blvd., Suite 180		
	(Ad	dress)	
	Los Angeles, CA 90028 (City/State/	and Zip Code)	
For further in	formation concerning this matter, ple	•	•
Katis Lee		at (323) 962-8600 x	
	(Name of Person)	(Area Code & Daytime Te	tophone Number)
Enclosed is a	check for the following amount:		
Ø \$35 Filing Pe	Certificate of Status	S43.75 Filing Fee & Cartified Copy (Additional copy is enclosed)	☐ \$52.50 Filing For Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer	ug Address adment Section	Street Address Amendment Section	·
Division of Corporations P.O. Box 6327		Division of Corporations 409 E. Gaines Street	
Tallahassee, FL 32314		Tallahassee, FL 32399	

SECRETARY OF STATE

2006 NOV 13 AM 10: 03

Articles of Amendment to Articles of Incorporation of

AMERICAN BENEFIT PLAN, INC.
(Name of corporation as currently filed with the Florida Dept. of State)
P08000128333
(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:
NEW CORPORATE NAME (if changing):
(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Article VII: The following are the sole directors of the corporation:
John O. Cooper: 102 NE 2nd Street, #394 Boca Raton, FL 33432
Blake Christensen: 102 NE 2nd Street, #394 Bocs Reton, FL 33432
Martin Toha: 102 NE 2nd Street, #394 Bosa Ration, FL 33432
·
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A
(continued)

The date	of each amendment(s)) adoption: 11-01-08
Effective	date if <u>applicable</u> :	
	(n	no more than 90 days after amendment file date)
Adoption	of Amendment(s)	(CHECK ONE)
Ø	The amendment(s) wa	as/were approved by the shareholders. The number of votes cast for the shareholders was/were sufficient for approval.
		as/were approved by the shareholders through voting groups. The nust be separately provided for each voting group entitled to vote indment(s):
	"The number of vo	otes cast for the amendment(s) was/were sufficient for approval by
		(voting group)
0	The amendment(s) wa and shareholder action	as/were adopted by the board of directors without shareholder acti n was not required.
	The amendment(s) was shareholder action was	as/were adopted by the incorporators without shareholder action as as not required.
Signed this	day of No	ovember 2008 .
	Signature	22
	selected,	octor, president or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court at fiduciary by that fiduciary)
	Martin T	roha
		(Typed or printed name of person signing)
	Secreta	iry
		(Title of person signing)

FILING YEE: \$35