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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SIMPLE FINANC	TAL GROUP, INC.			
	BER: P07000044601				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	itter to the following:			
	Eric Mari				
	·	Name of Contact Person	1		
	SIMPLE FINANCIAL GROUP, INC.				
		Firm/ Company			
	6541 SW 112 Ave				
		Address			
	Miami / FL 33173				
		City/ State and Zip Cod	e		
	vikingocubano@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:at (305	903-0822		
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made				
□ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
An Div P.C	illing Address mendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 ?	Address ment Section of Corporations entre of Tallahassee S. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

FILED

SIMPLE FINANCIAL GROUP, INC.

2022 SEP - 1 PM 12: 25

(Name o	of Corporation as currently	filed with the Florida Dept. of State
P07000044601		MALLAHASSE C
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this a	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:	
N/A		The new
	Sorp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address,	if applicable:	N/A
Principal office address MUST BE A S		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		N/A
(Stutting address SIAT BE A POST (OFFICE BOX	-
). If amending the registered agent an		
new registered agent and/or the nev	y registered office address:	
Name of New Registered Agent	N/A	
	(Florida stre	et address)
New Registered Office Address:	N/A	, Florida
		City) (Zip Code)
New Registered Agent's Signature, if cl hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar w	ith and accept the obligations of the position.
	Signature of New Re	gistered Agent, if changing
Theck 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)

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>P1</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	PT	Giselle L. Garcia	6541 SW 112 Ave	
Add			Miami, FL 33173	
Remove				
2) X Change	SV	Eric Mari	6541 SW 112 Ave	
Add			Miami, FL 33173	
Remove Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an 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)
N/A

•

	08/29/2022		
The date of each amendment(s) adop		_, if other th	an th
date this document was signed.			
08/29/2	2022		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		
	tho more than 90 days after amenament fue date)		
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirements, this date will rtment of State's records.	not be listed	as th
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board of directors without shareholder action and	shareholder	
☐ The amendment(s) was/were adopte by the shareholders was/were suffi-	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.		
must he separately provided for ea	ved by the shareholders through voting groups. The following statement of ch voting group entitled to vote separately on the amendment(s):		Ţ
		. 1	
by	(voting group)	 10	
	eri T	· ፲&	- Tarana
08/29/2022 Dated		PM 12: 25	-42
Signature	W	_	
selected, t	etor, 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 fiduciary by that fiduciary)		
Gi	selle L. Garcia		
_	(Typed or printed name of person signing)		
Pro	esident		

(Title of person signing)