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Amend Wis

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I ALBRITTON

COVER LETTER

TO: Amendment Sect Division of Corp	•					
NAME OF CORPORATION: ADFG & Associates Corp.						
	DOCUMENT NUMBER: 07000081846					
The enclosed Articles	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:						
	Gary Schillinger					
		Name of Contact Person	1			
	ADFG & Associates Corp.					
		Firm/ Company				
	8143 NW 12th Street					
		Address				
Coral Springs, FL 33071						
		City/ State and Zip Code				
	O					
Sales(@coastlinesales.com	sed for future annual report	natification)			
	E-man address, (to be us	sed for fature annual report	TRACTICE COMP			
For further information	n concerning this matter, pleas	se call:				
Gary Schillinger		954 at (3411487			
Name (of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State.						
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Conditions of Status Contribed Copy (Additional Copy is enclosed)			
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section in of Corporations Building Necutive Center Circle issec. FL 32361			

Articles of Amendment to Articles of Incorporation of

ADFG & Associates Corp.	
(Name of Corporation as c	currently filed with the Florida Dept. of State)
P07600081846	
(Document Nu	unber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following arises described
A. If amending name, enter the new name of the corpora	tion:
	The next
	poration," "company," or "invorporated" or the abbreviation is "," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u>ω</u>
D. If amending the registered agent and/or registered offi	
new registered agent and/or the new registered office :	address:
Name of New Registered Agent	
(Fl	orida street address)
New Registered Office Address:	, Florida
	(City) (Žip Code)
New Registered Agent's Signature, if changing Registered	Agent:
I hereby accept the appointment as registered agent. I am fa	miliar with and accept the obligations of the position.
Signature o	f 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 : Trustec, C = Chairman or Clerk, CSCExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one (itle, list the first letter of exc) > 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 letted as the V-Tea change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, $P^{(T)}a(u) \cap z$ Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: N 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>A</u> .td <u>rg</u> ₅ s
1) Change			
Add			Colored April 2 and a second s
Remove			
2) Change			
<u> </u>			
3.) Change			
Add			
Remove			
4) Change			
Add			The control of the co
Remove			
5) Change			
Remove			
o) Change			
, Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) President / Director Gary Schillinger, 8143 NW 12th Street Coral Springs, FL 33071 Is also 100 % Owner of the Company and 100 % Shareholder of ADFG & Associates Corp.					
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)					

The date of each amendment() adoption:	, if other 1, v
date this document was signed. Effective date if applicable:	nmediately November 01/2018	
r, nective date <u>n applicable</u> :	(no more than 90 days after ame	ndment file dettet
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory fi Department of State's records.	iling requirements, this date will, not be listed is
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of vote sufficient for approval.	s cast for the amendment(s)
	approved by the shareholders through voting grouf for each voting group entitled to vote separately a	
"The number of votes of	ast for the amendment(s) was/were sufficient for a	approval
by	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder	action and shareholder
Dated	Nov 5 Zar8	
Signature (By	a director, president or other officer – if directors	or officers have not been
sele	eted, by an incorporator – if in the hands of a reception of in the hands of a reception of incorporation in the hands of a reception of the hands of the ha	
	Gary Schilliner Ganus	Schillingen
	(Typed or printed name of person s	signing)
	President / Officer	Kub (Pres)
	(Title of person signing	(/