(	(Requestor's Name)
	(Address)
`	,
- (	(Address)
(	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $\frac{1}{2}$	BIG MAN PROM	OTIONS INC	
DOCUMENT NUMBER: P0700			
The enclosed Articles of Amenda	ient and fee are st	ibmitted for filing.	
Please return all correspondence of	oncerning this ma	atter to the following:	
BARRETT	W. PURVIS		
		Name of Contact Person	1
<del></del>		Firm/ Company	
202 SOUT	H PARKER STR	EET UNIT \$46	
		Address	
TAMPA, 1	FL. 33606		
•		City/ State and Zip Cod	2
YAGERTAXNO	T@AOL.COM		
	-	sed for future annual report	notification)
For further information concerning BARRETT W. PURVIS	g this matter, plea		804-2935
Name of Contact Person		at (at (	)
Enclosed is a check for the follow			•
	75 Filing Fee & ificate 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)
Mailing Address Amendment Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## Articles of Amendment

## Articles of Incorporation

	(	"		
BIG MAN PROMOTIONS INC				
( <u>Name</u>	of Corporation as curren	tly filed with the Florida De	pt. of State)	
P07000117921				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation	adopts the followin	g amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
				_The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp." "Inc." or	"Co". A professional corpo		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		202 SOUTH PARKER STREET UNIT 846		
		TAMPA, FL. 33606	TAMPA, FL. 33606	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	icable: OFFICE BOX)	202 SOUTH PARKER S	TREET UNIT 846	19 1 19 1 19 1 19 1 19 1 19 1 19 1 19
		TAMPA, FL. 33606		S 88
				ज वर्दे
D. If amending the registered agent ar			ime of the	SPORTE
new registered agent and/or the ne	w registered office addre	<u>ss:</u>		
Name of New Registered Agent	BURRETT W PURVIS			<b>P</b> 04.5
	202 SOUTH PARKER STREET UNIT 846			
	(Florida s	street address)	<del>-</del>	-
New Registered Office Address:	TAMPA		. Florida 33606	
		(City)	<del></del> ,	Code)

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

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>	Address
1) Change			
Add			
Remove			
2) Change			
Add		<del>-</del>	
Remove			
3 ) Change			
Add			<del></del>
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
Kentove			•
6) Change			
Add			
Remove			

	iecessary). (Be specific	:)		
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	'	<del></del>		
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an amendment provides for implementing	for an exchange, reclassing the amendment if no	ification, or cancellation to contained in the amer	on of issued shares,	
an amendment provides for implementing (if not applicable, indicable, indicable)	ng the amendment if no	ification, or cancellation to the amer	on of issued shares, adment itself:	
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08/23/2019
The date of each amendment(s) adoption:, if other than the
date this document was signed.
08/23/2019  Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
08/23/2019
DatedSignature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
BARRETT W. PURVIS
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

. . . . .