## P08000005429

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## COVER LETTER

TO: Amendment Secti Division of Corpo			6
	NATION: Investig	[	
DOCUMENT NUME	ER: <u>PD 800000 5</u>	429	
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	Anne	HEM Bridges Name of Contact Person	
		A / IA	
		Firm/ Company	
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	<u>lempi</u>	e Terrace, F City/ State and Zip Code	1 0 001
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Annette_bridges @ yahoo.com  E-mail address: (to be used for future annual report notification)			
	E-mail address: (to be us	ed for future annual report	nouricauon)
For further information	n concerning this matter, pleas	se call:	
Leonard	Martino	at ( <u>8/3</u>	) 414 - 1984 le & Daytime Telephone Number
Name (	of Confact Person	Area Coo	ie & Daytine Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fcc	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address	-	Address
	endment Section		ment Section
	sion of Corporations  Roy 6327		n of Corporations entre of Tallahassee
	P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

Investigue Inc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
PD8000005429	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name thust be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	_ N /A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A 20
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree  New Registered Office Address:	et address), Florida
, ,	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wi	
Signature of New Reg	gistered Agent, if changing

Check 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.

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	Name	Address
I) Change	I	Annette M. Bridge	5 6703 Dunes LN.
Add Remove	,		Temple Terrace Fl. 33617
2) Change	$\searrow$	<u>Catherine</u> Meek	5 10420 N. OKLQWaha A
Add Add			Tampa, Fl. 33617
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
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5) Change			
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an amendment pro	ovides for an excl	hange, reclassifica	ition, or cancellati	on of issued shar	res,	
	ementing the ame	endment if not cor	ntained in the ame	endment itself:		
rovision <u>s for imple</u>	e, indicate N/A)		_			
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The date of each amendment(s) adoption: September 17, 202   if other than the date this document was signed.
Effective date if applicable:  Sept 17202  (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 incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ 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)
Dated September 17, 2021 Signature Level J. Martin
Signature Levant J. Martino
(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)
(Typed or printed name of person signing)
Tresident (Title of person signing)