

| (Requestor's Name) |
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| (Address) |
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| (Address) |
| (City/State/Zip/Phone #) |
| (City/State/Zip/Fillone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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2010 cm 20 PT to 28

C. GOLDEN FEB 2 0 2018

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Ori | gin PC Corporat | tion | | | | |
|---|-----------------------------|--|--|--|--|--|
| DOCUMENT NUMBER: P09000045815 | | | | | | |
| The enclosed Articles of Amendmen | | omitted for filing. | | | | |
| Please return all correspondence con | cerning this mat | ter to the following: | | | | |
| Max Langen | | | | | | |
| | Name of Contact Person | | | | | |
| <u></u> | | Firm/ Company | | | | |
| 115 E. Palm I | Midway | | | | | |
| | | Address | | | | |
| Miami Beach | , FL 33139 | | | | | |
| | | City/ State and Zip Code | | | | |
| max_langen@hotm | ail.com | | | | | |
| E-mail a | ddress: (to be us | ed for future annual report | notification) | | | |
| For further information concerning t | his matter, pleas | e call: | | | | |
| Max Langen | | at (305 | 343-1423 de & Daytime Telephone Number | | | |
| Name of Contact Per | son | Area Co | de & Daytime Telephone Number | | | |
| Enclosed is a check for the following | g amount made p | payable to the Florida Depa | rtment of State: | | | |
| - | Filing Fee & cate of Status | □S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | | |
| Mailing Address Amendment Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32 | rations | Amend Divisio Clifton | Address ment Section n of Corporations Building xecutive Center Circle | | | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

2019 FFP 20 TH 4: 28

| t , |
|--|
| s currently filed with the Florida Dept. of State) |
| |
| Number of Corporation (if known) |
| ntutes, this Florida Profit Corporation adopts the following amendment(s) t |
| ration: |
| The new |
| corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the reviation "P.A." |
| <u>SS</u>) |
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| |
| office address in Florida, enter the name of the ce address: |
| |
| |
| (Florida street address) |
| |
| /City) , Florida, Florida |
| • |
| |
| red Agent: |
| n familiar with and accept the obligations of the position. |
| |
| |
| e 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.

| X Change | <u>PT</u> | John Doe | | | | |
|-------------------------------|------------|--------------------|---------------------------|--|--|--|
| X Remove | <u>v</u> | Mike Jones | | | | |
| X Add | <u>\$V</u> | <u>Sally Smith</u> | | | | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s | | | |
| 1) Change | <u>v</u> | Linda Rodriguez | 12400 SW 134 Court Ste #8 | | | |
| X Add | | | Miami, FL 33186 | | | |
| Remove | | | | | | |
| 2) Change | | | | | | |
| | | | | | | |
| Remove | | | | | | |
| 3) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | _ | | <u> </u> | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 5) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| δ) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |

| | (Be specific) |
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| If an amendment provides for an excl | nange, reclassification, or cancellation of issued shares. |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
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| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |

| • | 2/14/2018 | |
|---|--|------------------------|
| The date of each amendment(s date this document was signed. |) adoption: | , if other than the |
| Effective date <u>if applicable</u> : _ | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in the | is block does not meet the applicable statutory filing requirements, this date will Department of State's records. | I not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were by the shareholders was/were | adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval. | |
| | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): | |
| | ast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| • | (voting group) | |
| ☐ The amendment(s) was/were action was not required. | adopted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were action was not required. | adopted by the incorporators without shareholder action and shareholder | |
| 2/14/20 | 18 | |
| Dated | | |
| Signature | YW . | |
| (By | a director, president or other officer – if directors or officers have not been ceted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) | _ |
| | Kevin Wasielewski | |
| | (Typed or printed name of person signing) | |
| | Director, CEO | |
| | (Title of person signing) | |