P1000015998

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2017 DEC 19 5811: 19

C. GOLDEN
DEC 2.2. 2017

COVER LETTER

TO: Amendment Section **Division of Corporations**

.

NAME OF CORPO	PRATION: BOOM MARKETI	NG AND EVENTS, INC.					
DOCUMENT NUM	P10000075008						
The enclosed Article	rs of Amendment and fee are sul	omitted for filing.					
Please return all corr	espondence concerning this mat	ter to the following:					
	ALISON YOCCA						
	Name of Contact Person						
	BOOM MARKETING AND EVENTS, INC.						
	Firm/ Company						
	5703 RED BUG LAKE ROAD, SUITE 161						
	Address						
	WINTER SPRINGS FL 3270	8					
		City/ State and Zip Cod	e				
ALI	@CONSULTBOOM.COM						
	E-mail address: (to be us	ed for future annual report	notification)				
For further informati	on concerning this matter, please	e call;					
ALISON YOCCA		at (885-0226				
Name	of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check t	for the following amount made p	ayable to the Florida Depa	artment of State:				
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate 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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILLES

2017 DEC 19 AMIL: 19 BOOM MARKETING AND EVENTS, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P10000075998 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: CONSULT BOOM INC. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip 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	٧	NICHOLAS YOCCA	3004 HARBOUR LANDING WAY
X Add			CASSELBERRY FL 32707
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	···········		· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
6) Change	 		-
Add			
Remove			

L. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)						
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. <u>If an</u> pro	amendment provides for an exc visions for implementing the amo (if not applicable, indicate N/A)	hange, reclassifice andment if not co	ation, or cancel ntained in the a	lation of issued mendment itse	shares, lf:	
						
	·					
				<u> </u>		·
			•			·

	or	17/17	0012	
The date of each amendment(s) addate this document was signed.	loption:	1414	WIT	, if other than the
Effective date if applicable:	(no more that	in 90 days after amendm	nent file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the appartment of State's records	plicable statutory filing	requirements, this date wi	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were ado by the shareholders was/were su		The number of votes cas	st for the amendment(s)	
☐ The amendment(s) was/were app must be separately provided for				
"The number of votes cast	for the amendment(s) was/v	were sufficient for appro	oval	
by			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)			
☐ The amendment(s) was/were ado action was not required.	pted by the board of directe	ors without shareholder	action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators w	without shareholder action	on and shareholder	
12/12/2017 Dated				
Signature	Mocia			
selected	irector, president or other o d, by an incorporator – if in ted fiduciary by that fiducia	the hands of a receiver		
	ALISON M. YOCCA			
	(Typed or print	ted name of person signi	ng)	
	PRESIDENT			
	(Tit	tle of person signing)		