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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	h Partners		
DOCUMENT NUME	BER: P12000019306			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Darcy Ecklund			
•		Name of Contact Person	n	
	Dimensions Wealth Partners	Inc.		
•		Firm/ Company		
	1913 Seagull Drive			
,		Address		
	Clearwater, FL 33764			
•		City/ State and Zip Cod	e	
darev	ieeecklund@gmail.com			
	0.1	sed for future annual report	notification)	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	
For further information	concerning this matter, pleas	se call:		
Darcy Ecklund		, 863	669-3015	
Name of Contact Person		at () Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 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		Street Address		
	ndment Section	Amendment Section		
			ion of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			-	

Tallahassee, FL 32301

Articles of Amendment

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to Articles of Inco

	Articles of Inco	orporation	
Dimension	ns Weal!	Parthers-	Inc
(Name	of Corporation as currently	filed with the Florida Der	ot. of State)
41200	099306		
-	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation (adopts the following amendment(s) to
A. If amending name, enter the new m	ame of the corporation:		
Darcy Inc.			
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp." "Inc." or "C	.o". A professional corpor	
B. Enter new principal office address, if applicable:		n/a	
(Principal office address <u>MUST BE</u> A S			
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		n/a	
D. If amending the registered agent an			me of the
new registered agent and/or the new		•	
Name of New Registered Agent	n/a		
	(Florida stre	et address)	
New Registered Office Address:	n/a		Florida
New Registered Office Address.		(City)	(Zip Code)
			Fill to
New Registered Agent's Signature, if c		51 I I II	S & TI
I hereby accept the appointment as regist	erca agent. Tam jamittar w	un and accept the obligation	ns of the position.
	Signature of New Re	egistered Agent, if changing	
			- E

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: <u>X</u> Change	<u>PT</u>	<u>John Doe</u>	
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>	Address
1) Change		_	
Add			
Remove			
2) Change		_	
Add			•
Remove			
3) Change		_	
Add			
Remove			
4) Change			-
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

. . . . E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) n/aF

f 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)				
	<u> </u>				
					
				· 	
<u> </u>					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 document's effective date on the Department of State's records.	not be listed as the
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.	
October 31, 2018 Dated	
Signature Day Exilual	_
(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)	
Darcy Ecklund	
(Typed or printed name of person signing)	
Registered Agent / Incorporator	
(Title of person signing)	 _

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