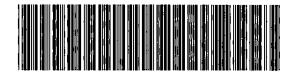
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DIVISION OF CORPORATIONS

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Lenny

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Inspiring U, Inc. P12000037570 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Scarlet Veres** Name of Contact Person Inspiring U. Inc. Firm/ Company 2706 Valiant Dr. Address Clermont, FL 34711 City/ State and Zip Code Scarlet@inspiringuvapor.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Scarlet Veres** Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Inspiring U. Inc.

14 OCT 29 PH 4: 35

mspiring o, me.	
(Name of Corporation as currently filed with the Flow P12000037570	rida Dept. of State)
(Document Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
l .	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
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 new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:	, Florida
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 wit	h and accept the obligations of the position.
Signature of New Registered Ag	ent, 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	PT	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s		
1) Change	VP	Dilan Jame	es Rice	2706 Valiant Dr		
Add				Clermont FL, 34711		
Remove						
2) Change				<u></u>		
Add						
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
Charres						
6) Change						
Add						
Remove						

	heets, if necessary). (Be	1 Uy		
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provisions for im (if not applica	provides for an exchange plementing the amendments indicate N/A)	ent if not contain	ed in the amendment	ued shares, itself:
VANANAA ''''''' *	of shares to newly a	ppointed VP L	Dilan Rice	
xcriange 20% C				
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Acriange 20% C				

The date of each amendmen	t(s) adontion:	5	FILI SECRETARY	OF STATE	_, if other than the
date this document was signed			151014 GF	THE DAY STATE	_, ii Omer man die
Effective date if applicable:	10/21/2014	1/	+ OCT 29	PM 4: 35	
	(no	more than 90 days after amendm	ent file date,	1	_
Adoption of Amendment(s)	(CHECK	ONE)			
The amendment(s) was/we by the shareholders was/w		olders. The number of votes cas	t for the ame	endment(s)	
		cholders through voting groups. o entitled to vote separately on th			
"The number of vote	s cast for the amendmen	t(s) was/were sufficient for appro	val		
by	(voting gr		·,,		
	(voting gr	oup)			
The amendment(s) was/we action was not required.	re adopted by the board	of directors without shareholder	action and sl	nareholder	
The amendment(s) was/we action was not required.	re adopted by the incorp	orators without shareholder actio	n and sharel	oolder	
Dated_10/2	1/2014				
Bignature.	1 con lette	REA			
(E	y adirector, president of elected, by an incorporate operated fiduciary by the	r other officer – if directors or of or – if in the hands of a receiver, at fiduciary)	ficers have r trustee, or o	not been ther court	-
	Scarlet Veres				
	· · · · · · · · · · · · · · · · · · ·	(Typed or printed name of person	n signing)		-
	President				
		(Title of person signing)			-