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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: EXCLUSIVE MA	NAGEMENT SERVICES	
DOCUMENT NUMI	BER: <u>P12000</u> C	15854	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	atter to the following:	
	Esteban Adden		
	*****	Name of Contact Person	1
	Exclusive Payroll Services In	ne	
		Firm/ Company	
	235 Commercial Blvd, Suite	201	
	Address		
	Lauderdale by the Sea FL 33	308	
		City/ State and Zip Cod	2
esteb	an@oneforcewc.com		1/
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Esteban Adden		954 at (451 - 7203
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment 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		Street	Address
Amendment Section		Amendment Section	
	sion of Corporations Box 6327		n of Corporations Building
	ahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

EXCLUSIVE MAN	VAGEMENT SERVICES, INC.				
-	(Name of Corporation	as currently filed with the Flo	orida Dept. of State)		
P12000075854	P1200004676	8			
	(Docume	nt Number of Corporation (if kn	own)		
its Articles of Incorp			poration adopts the follo	owing amendme	ent(s) to
A. If amending nar	me, enter the new name of the corp	ooration:			
				The new	,
"Corp.," "Inc.," or	nguishable and contain the word Co.," or the designation "Corp." professional association," or the al	"Inc," or "Co". A profession	r "incorporated" or thud corporation name m	ne abbreviation nust contain the	1 ?
		T.A.	-	15 B	
	<u>cipal office address, if applicable:</u> Tress <u>MUST BE A STREET ADDR</u>			<u> </u>	F H
(Frincipal office add	uss <u>piosi de a sikeet addk</u>	<u>E33</u>)			, 1277221 1 227222 3
		<u></u>		<u></u>	7 - [1]
				<u> </u>	
	ing address, if applicable:			ထ	'Qual's'
(Mailing address	S <u>MAY BE A POST OFFICE BOX</u>			<u></u>	
		_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
					
D. If amending the	registered agent and/or registered	l office address in Florida, ent	er the name of the		
new registered a	igent and/or the new registered of	fice address:	· 		
Name of Ne	w Registered Agent				
		(Florida street address)			
New Revisto	red Office Address:		. Florida		
		(City)	 _	Zip Code)	
New Registered Age	ent's Signature, if changing Regist	ered Agent:			
i noreny accept the a	ppointment as registered agent. Ta	m familiar with and accept the (obligations of the position	m.	

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> <u>Joh</u> r	1 <u>.Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	2	ANN JANUSY PAZ	235 COMMERCIAL BLVD #201
XAdd			LAUDERDALE BY THE SEA
Remove			FLORIDA 33308
2) X Change	c00	BRIAN TORRES	235 COMMERCIAL BLVD #201
Add			LAUDERDALE BY THE SEA
Remove			FLORIDA 33308
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

Attach additional sheets, if necessary)	(Be specific)	
	_	
		-
<u> </u>		
		_
		
		
		-
f an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,	
provisions for implementing the amen	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		_
-		
	-	_

The date of each amendment(s) adoption: date this document was signed.	, if other than the
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 document's effective date on the Department of State's records.	e will 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):	ıt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
☐ 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.	
08/01/2019	
Signature Es Alan Allen	
(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)	
ESTEBAN ADDEN	
(Typed or printed name of person signing)	
CFO	
(Title of person signing)	