## P12000087073

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Black Swan Even	ts, Inc.	
DOCUMENT NUMBER: P12000087073		
The enclosed Articles of Amendment and fee are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Sydonie M. Neysmith		
Black Swan Events, Inc.	Name of Contact Person	n
	Firm/ Company	
6750 N Andrews Ave. #200		
Ft. Lauderdale, FL 33300	Address	
	City/ State and Zip Cod	e
sneysmith@blackswanevent	sinc.com	
E-mail address: (to be u	sed for future annual report	notification)
For further information concerning this matter, plea	ise call:	
Callhan Soldavini	at ( 239	775-4555
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 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	Amend Divisio The C	Address Iment Section In of Corporations Control of Tallahassee S. Monroe Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

black Swan Events, Inc.	- F. C	L. Cl. J. W. D. J. Co. J.
( <u>Name</u> P12000087073	or Corporation as current	ly filed with the Florida Dept. of State)
1200007075	(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607 ts Articles of Incorporation:		Florida Profit Corporation adopts the following amendment(s)
1. If amending name, enter the new n	ame of the corporation:	
Black Swan Consulting, Inc.		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Torp," "Inc," or "Co"	company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		6750 N Andrews Ave. #200
		Ft. Lauderdale, FL 33309
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6750 N Andrews Ave. #200
	<del></del>	Ft. Lauderdale, FL 33309
). If amending the registered agent ar	nd/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the ne-	-	<u>s:</u>
Name of New Registered Agent	Sydonie M. Neysmith	
	6750 N Andrews Ave. #20	00
	(Florida sti	reet address)
New Registered Office Address:	Ft. Lauderdale	
		(City) (Zip Code)
Sew Registered Agent's Signature, if c		
hereby accept the appointment as regist	ered agent. I am familiar	with and accept the obligations of the position.
	$\rightarrow$	
	Signature of New R	egistered Agent, if changing
Check if applicable  The amendment(s) is/are being filed n	urcuppt to a 607 0120 (11)	(a) ES

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>John Do</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) X Change	Preside	n —	Sydonie M. Neysmith	6750 N Andrews Ave. #200
Add				Ft. Lauderdale, FL 33309
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary). (Be specific)  I 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)	. ,	sary). (Be specific)	
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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 fi	le date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requi Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	shareholder action and shareholder
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for a sufficient for approval.	the amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amount	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Octobei Dated	19, 2020	<b>.</b>
Signature		<i></i>
sele	a director, president or other officer of directors or officer of the directors or officer of the directors of th	
	Sydonie M. Neysmith	
	(Typed or printed name of person signing)	
	President & CEO	
	(Title of person signing)	

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