

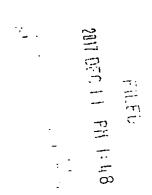
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COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Fortitude Financial Grup, Inc 12000 104593 NAME OF CORPORATION: DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rober Lu Fortytele Financial Group Dre

Firm/ Company

2849 Executive Da #100

Address

Clearuntes FC 33762

City/ State and Zip Code Robert · Lee & Fortitude Fg. um
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 1/obert lu at (813) 6 co 90 99

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: ☑\$43,75 Filing Fee & □\$52.50 Filing Fee □S43.75 Filing Fee & ☐ \$35 Filing Fee Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

> Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

Fil.Eu

 .	of .	2017 DEC 11 PH 1:48
tortifice Finan	ust Grup, Fixe	
	on as currently filed with the Florid	la Dept. of State)
\mathcal{P} / \mathbf{z}	2000 104593	***
(Docume	ent Number of Corporation (if known	1)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpora	ation adopts the following amendment(s) to
A. If amending name, enter the new name of the con	rporation:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the a	" "Inc." or "Co". A professional eabbreviation "P.A."	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADD</u>	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON	V	
		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		he name of the
new registered agent and/or the new registered of	mice address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	(City)	, Florida (Zip Code)
	(C757	(inp Code)
New Registered Agent's Signature, if changing Regi		e e au ee
I hereby accept the appointment as registered agent. I	am familiar with and accept the obt	igations of the position.
		<u> </u>
Signa	mare of New Revistered Agent, if cha-	กงเกง

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 Doc 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> <u>Mike Jones</u>	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One)	Title Name Rohart Hall Sa	<u>Addres</u> s
1) Change	V Kunsa + India	Same
_ <u>X</u> Add		
Remove		
2) Change		
Add		
Remove		- <u>-</u>
3.) Change		
Add		
Remove		
4) Change		
Add		
Remove		
51 Change		
Add		
Remove		
6) Change		
Add		
Remove		

Attach additional sheets, if	ditional Articles, en necessary). (Be s	pecific)			
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· -			<u>_</u>		
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			_		
					
<u>f an amendment provides</u>	for an exchange,	reclassification, o	r cancellation of i	ssued shares,	
provisions for implement	ing the amendmen	t if not contained	in the amendmen	it itself:	
(if not applicable, indi	icate N/A)				
					 _
<u>, </u>		·			

The date of each amendment(s) add	option:, if other than the
date this document was signed.	12-9-17
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than rivally after amenament for anter
Note: If the date inserted in this bl document's effective date on the Dep	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes east for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east f	or the amendment(s) was/were sufficient for approval
bv	
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adoption was not required.	pted by the incorporators without shareholder action and shareholder
Dated	12-7-17
Signature	Rec Presider
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
аррония	Robert Lee
-	(Typed or printed name of person signing)
	President
-	(Title of person signing)