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## COVER LETTER

Division of Corporations VIE SEARCH CORPORATION NAME OF CORPORATION:  $\cup$ DOCUMENT NUMBER: \_\_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company BOCA RATON FL City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address

# **Mailing Address**

TO: Amendment Section

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# Articles of Amendment

# Articles of Incorporation

A	of	or actor				
OGILVIE	SEARC	H C	DRPOR	MOITA	l	
(Name of Corporation			Florida Dept.	of State)		
P13 <i>c</i>	200025	3248				
(Documer	nt Number of Co	rporation (if	known)			
Pursuant to the provisions of section 607.1006, Florida S ts Articles of Incorporation:	Statutes, this <i>Flor</i>	ida Profit C	orporation add	opts the follov	ving amo	endment(s)
A. If amending name, enter the new name of the corp	ooration:	NIA			The	
name must be distinguishable and contain the word	"corporation,"	"company,"	or "incorpor	rated" or the		
"Corp.," "Inc.," or Co.," or the designation "Corp," vord "chartered," "professional association," or the ab			onal corporat	tion name mu	st conta	in the
vora Charlerea, projessional association, of the ab	mreviation F.A.	<b>N</b>	JIA.	من با اسمه	201	
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDR		r	<sup>4</sup> IH	<u>```</u>	<del></del>	<del></del>
Principal office address MUST BE A STREET ADDR	<u> </u>			<u>:                                 </u>		
				· .	0	
	_	***			<del></del>	4
Enter new mailing address, if applicable:		N	14		ယ္	the state of
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	<b>'</b>	i 4	1,,	***.*	_ <u>~~</u> _	
	_					
	_		_			
<ol> <li>If amending the registered agent and/or registered new registered agent and/or the new registered of</li> </ol>		<u>in Florida, c</u>	nter the name	e of the		
		k t	10			
Name of New Registered Agent		Id	( )		<del></del>	
	(Florida street a	ddress)				
New Registered Office Address:		_	,	Florida		
	(City	)		(Z	(ip Code	
N D. wint and America Signature if changing Dugies	torad Agants					
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I describe the appointment as registered agent.	am familiar with	and accept t	he obligations	of the positio	n.	
		-	-			
					<u>.</u>	
Signati	ure of New Regis	tered 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>	John D	oc_	
X Remove	<u>V</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) X Change	P	<del></del>	BARRY A. LEHMAN	
Add			'	BOCA KATON FL 3348
Remove			. 1-	
2) X Change	<u>\</u>	_	Robin B. Schwartz	644 BOCA MARINA COU
Add				BOCA KATON TL STIBI
Remove				
3) Change		_		<del></del>
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				<del>.</del>
Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessa	ry). (Be specific)	( <u>s) here</u> : N/A		
		•		-
		·····		-
<del></del>				-
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				••
If an amendment provides for an provisions for implementing the	exchange, reclassificati	ion, or cancellation of	issued shares,	
(if not applicable, indicate N/2	4)	A	ene reserr.	
	101	1 1		
		1 1		

The date of each amendment(s) adoption:, if other that 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 not be listed a document's effective date on the Department of State's records.
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)
(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.
Dated 10/24/19
Signature Dally (1. Jennen
(By a director, president of other officer - if directors or officers have not been
selected, by an inforporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed of printed name of person signing)
(Typed of printed name of person signing)
PRESIDENT
(Title of person signing)

the

the