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DATE:

5/4/20

NAME: CARDIFF LEXINGTON LLC

TYPE OF FILING: AMENDMENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Cardiff Lexington	Corporation	
DOCUMENT NUM	P14000072009		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Daniel R Thompson		
		Name of Contact Person	1
	Cardiff Lexington Corporation	on	
		Firm/ Company	
	401 E Las Olas Blvd. Suite I	1400	
		Address	<u></u>
	Ft. Lauderdale, FL 33301		
	<u> </u>	City/ State and Zip Cod	e
	daniel@cardifflexington.com	ı	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Name	of Contact Person	at (Area Co	/ de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment 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)
Ar Di P.O	nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Division The C 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment Articles of Incorporation

Cardiff Lexington Corporation

(Name of Corporation as co	urrently filed wit	h the Florida Dep	ot. of State)		
P1/10000 72009					
(Document Nu	imber of Corporat	ion (if known)			
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	es, this <i>Florida Pi</i>	ofit Corporation a	idopts the fol	lowing	; amendmen
A. If amending name, enter the new name of the corporat	tion:				T
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp," "Inc," or "Corpital association," or the abbreviation	Co". A professio				
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 offinew registered agent and/or the new registered office a Name of New Registered Agent		rida, enter the na	me of the	SECRETARY OF STATE	2020 HAY -4 AM 91 53
	orida street address)	-		
	oriaa sireet aaaress	,	E)		
New Registered Office Address:	(City)		_, Florida	(Zip C	ode)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa			ns of the posi	ition.	
Check if applicable					

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office <math>k. 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. Thera change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a CharMike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>N</u> am	<u>ne</u>	<u>Addres</u> s	
1) Change					
Add					
Remove					_
2) Change		_			
Add					
Remove 3) Change					_
Add	`				
Remove					
4) Change					
Add					
Remove					
5) Change					_
Add					_
Remove					_
6) Change					_
Add					_
					_
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
· · · · · · · · · · · · · · · · · · ·	
	<u>-</u> .
	<u>-</u>
F. If 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)	
The Board of Directors has authorized a 10,000 to 1 Reverse Split of the Compnay's authoized and issued (
This action shall constitute a reduction of the authorized shares of of issued Common Stock from 1,571,58	6,971 to 157,158
with a par value of \$0.001	
·	

• • •

	April 27, 2020
The date of each amendm date this document was sign	ent(s) adoption:, if other that ded.
	May 11,2020
Effective date <u>if applicabl</u>	(no more than 90 days after amendment file date)
	in this block does not meet the applicable statutory filing requirements, this date will not be listed in the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
☐ The amendment(s) was/action was not required.	were adopted by the incorporators, or board of directors without shareholder action and shareholder
	were adopted by the shareholders. The number of votes east for the amendment(s) /were sufficient for approval.
	were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):
	otes cast for the amendment(s) was/were sufficient for approval
by Danie	l Thompson
Uy	(voting group)
	April 27, 2020
Dated	1,7.1 27, 2020
Signature	(By a director, president or other officer – if directors or officers have not been
	(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)
	Daniel R Thompson
	(Typed or printed name of person signing)
	Сһаіппап
	(Title of person signing)