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JUL 2 4 2017 C McNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	Fund Simple Inc. RATION:				
DOCUMENT NUM	47-2455251 BER:				
The enclosed Articles	of Amendment and fee are su	abmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	Douglas Rovello				
	Name of Contact Person				
	Fund Simple				
	1627 Morning Dove Lane	Firm/ Company			
	Tarpon Springs , Florida 3	Address 4688			
		City/ State and Zip Cod	C		
dro	vello@fundsimple.biz				
_	E-mail address:	(to be used for future annua	l report notification)		
For further informatio	on concerning this matter, pleas	se call:			
Douglas Rovello		727 at (474-0209 _)		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment 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)		
Am Div	iling Address endment Section ision of Corporations . Box 6327	Amend Divisio	Address ment Section on of Corporations Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Fund Simple Inc (Name of Corporation as currently filed with the Florida Dept. of State) 47-245521 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following amendment(s) to its Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." Douglas Rovello B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1627 Morning Dove Lane Tarpon Springs, FL 34688 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Douglas Rovello / President Name of New Registered Agent 1627 Morning Dove Lane, Tarpon Springs FL 3468 (Florida street address) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Pres	Jason Miesemer	1627 Morning Dove Lane
Add			Tarpon Springs, FL 34688
Remove			
2) Change	Pres	Douglas Rovello	1627 Morning Dove Lane
x Add			Tarpon Springs , FL 34688
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			*181orf
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

is:					
The public benefit for which the corporation is organized is	:				

The specific public benefit(s) to be created by the corporation	on (in addition to the above) is/are as follows (optional):				
The additional qualifications of Benefit Director(s), if any,	ne additional qualifications of Benefit Director(s), if any, are as follows:				
The name(s) and address(es) of the Benefit Director(s) and/ Name and Title:	or Benefit Officer(s), if any: Name and Title:				
Address:	Address:				
(Include attachme	ent if necessary)				
The corporation, in accordance with the required minimum	status vote, terminates its status as a Florida Profit Socia				
Corporation in accordance with s. 607,505, F.S. The revise	d purpose for which the corporation is organized is as fo				

The additional qualifications of Benefit Director(s), if any, are no longer applicable and are hereby deleted.

accordance with s. 607.604, F.S.	is organized is to create a general public benefit and:
The purpose for which the benefit corporation	i is organized is to create a general phone ocherit and.
The general and/or specific public benefit(s) t follows (optional):	to be created by the corporation (in addition to its general purpose) is/a
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The additional qualifications of Benefit Direc	etor(s), if any, are as follows:
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The additional qualifications of Benefit Direc	etor(s), if any, are as follows:
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The name(s) and address(es) of the Benefit D Name and Title: Address: (Inc. The corporation, in accordance with the requirements)	birector(s), if any, are as follows: birector(s) and/or Benefit Officer(s), if any: Name and Title: Address: clude attachment if necessary) ired minimum status vote, terminates its status as a Florida Profit Bene
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	If amending or adding additional Articles, enter chan (Attach additional sheets, if necessary). (Be specific)	
	Artifacti didditional success, y necessary). The specific	
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	an amendment provides for an exchange, reclassifica	ation, or cancellation of issued shares,
F	rovisions for implementing the amendment if not con	ation, or cancellation of issued shares, tained in the amendment itself:
	an amendment provides for an exchange, reclassifications for implementing the amendment if not continuous (if not applicable, indicate N/A)	ation, or cancellation of issued shares, tained in the amendment itself:
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07/17/2017

The date of each amendment(s) adoptio	n:	, if other than the
date this document was signed. 07/17/201	7	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted b by the shareholders was/were sufficient	y the shareholders. The number of votes east for the amendment(s) at for approval.	
☐ The amendment(s) was/were approved must be separately provided for each to	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
Jason Miesemer/ Douglas		
	(voting group)	
action was not required. ☐ The amendment(s) was/were adopted b	y the board of directors without shareholder action and shareholder y the incorporators without shareholder action and shareholder	
action was not required.		
07/17/2017		
selected, by a	president or other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court fuciary by that fiduciary)	
Doug	glas Rovello	
	(Typed or printed name of person signing)	
Pres	ident	
	(Title of person signing)	