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Amend

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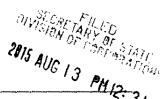
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Escape Room Ente	ertainment, Inc.			
DOCUMENT NUMB	D1\$000042120				
The enclosed Articles 6	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
	Patricia Nelson				
-	 	Name of Contact Persor	1		
	Patricia C. Nelson, CPA, PA				
-		Firm/ Company			
	2351 W. Eau Gallie Blvd. #7	,			
-	Address				
	Melbourne, FL 32935				
-		City/ State and Zip Code	<u> </u>		
pnelso	nepa@gmail.com				
• ————————————————————————————————————		sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Anthony Guarino		at (321	432-4218		
Name of Contact Person		at (321 ·) 432-4218 Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fiting Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, Fl. 32301

Articles of Amendment to Articles of Incorporation of



Escape Room Entertainment, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P15000063130 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A 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." 630 S. Wickham Road B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Unit 105 West Melbourne, FL 32904 C. Enter new mailing address, if applicable: 630 S. Wickham Road (Mailing address MAY BE A POST OFFICE BOX) Unit 105 West Melbourne, FL 32904 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: Name of New Registered Agent (Florida street address) New Registered Office Address: (Cin) 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. Signature of New Registered 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 Doe	
X Remove	\underline{V}	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Crista Guarino	844 Sedgewood Circle
Add x Remove		,	West Melbourne, FI. 32904
2) Change	VP	Darryl Adams	129 W. Laila Drive
X Add			West Melbourne, Fl. 32904
Remove 3) X Change	Т	Phyllis Guarino	2700 N. Hwy A1A, Bldg 13 #207
Add			Indialantic, FL 32903
Remove			ADDRESS CORRECTION ONLY
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			A
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	
F. If an amendment provides for an exch	range, reclassification, or cancellation of issued shares.
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
i	
	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	le date)
(no more mun 20 days after amenament ph	ic unity
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the 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 adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	he amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The families the separately provided for each voting group entitled to vote separately on the ame	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	n and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	i shareholder
8/11/15	
Dated	
Signature	
(By a director, president of other officer – if directors or officer	s have not been
selected, by an incorporator - if in the hands of a receiver, trust	ee, or other court
appointed fiduciary by that fiduciary)	
Anthony Guarino	
(Typed or printed name of person signing)	
President	
(Title of person signing)	