P15 0000 72490

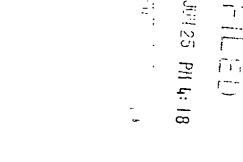
(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section

Division of C	Corporations		•
NAME OF COR	PORATION: The Owen Group C	Согр	·
DOCUMENT NU	JMBER: P15000072490		
	cles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	Donald Owen		
		Name of Contact Perso	n
	The Owen Group Corp		
		Firm/ Company	
	1300 West Industrial Ave Su	ite 101	
		Address	
	Boynton Beach Fl. 33426		
		City/ State and Zip Cod	e
	Don@Owen.Group		
	E-mail address: (to be us	ed for future annual report	notification)
For further inform	nation concerning this matter, pleas	se call:	
Don Owen		at (444-3008
Na	me of Contact Person		de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fe	e □\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810
Tallahassee, FL 32314		4415 i	N. MONTOE Street, Stiffe 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)
P15000072490
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
N/A The new
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."
N/A
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) N/A
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 N/A
(Florida street address)
New Registered Office Address:, Florida
(City) (Zip Code)
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
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, 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:

\underline{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	P	Bart Dinin	6301 NW 61st Ave
Add			Parkland Fl 33067
XXX Remove 2) XX Change	P	Donald Owen	1300 West Industrial Ave Suite 10
Add			Boynton Beach Fl. 33426
Remove 3) XX Change	VP	Alex Owen	1300 West Industrial Ave suite 10
Add			Boynton Beach Fl. 33426
Remove			
4) Change Add		_	
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	
WA .	
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<u> </u>	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
I removed Bart Dinin when I did my an	nual report, however I would like an amendment filed as well please.
art Dinin Cancel 50% ownership	
wnership is now as follows	
onald Owen 50% Ownership	
lex Owen50%	

	03/20/20	
The date of each amendment(s	s) adoption:	, if other than the
date this document was signed.	2220/20	
Effective date <u>if applicable</u> :)3/20/20	
	(no more than 90 days after amendment file date	?)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirement of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharely	holder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the are sufficient for approval.	nendment(s)
	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amendment	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
Donald Owen	. "	
	(voting group)	
03/20/2	0	
Dated		
Signature		
(By	a director, president or other officer – if directors or officers have ceted, by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	
	Donald Owen	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	