P15000092354

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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COVER LETTER

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TO: Amendment Secti Division of Corpo				16 FEB 15 C. 1. C.
NAME OF CORPOR	ATION: PRIVILEGE DIRE	ECT PORTFOLIO 2 INC.		5 mgc
DOCUMENT NUMB	ER: P15000092354			10 lots
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		, "
Please return all corres	pondence concerning this mat	tter to the following:		
	Processing Department			
-		Name of Contact Persor	1	
	My Corporation Business Ser	rvices, Inc.		
•		Firm/ Company		
	23586 Calabasas Road, Suite	102		
•		Address		
	Calabasas, CA 91302			
		City/ State and Zip Code	2	
proces	ssing@mycorporation.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	e call:		
Processing Departmen	ut	877	692-6772	
Name o	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	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)	
Ame Divi P.O.	ling Address Indment Section Ission of Corporations Box 6327 Industrial Box 6327	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

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les of Incorporation		
of	~ (S) ~	
	5	
currently filed with the Florida Dept. of State)	<i>(``,</i>	

PRIVILEGE DIRECT PORTFOLIO 2 INC.

(Name of Corporation as cu	urrently filed with the Florida Dept. of State)
P15000092354	
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	ion:
General Wealth Portfolio 2 Inc.	The new
	poration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the lation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>))
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 new registered agent and/or the new registered office a	ce address in Florida, enter the name of the
Name of New Registered Agent	
(Flo	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: miliar with and accept the obligations of the position.
Signature	f 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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			***************************************
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
If an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(y nos applicable, maicale (**/1)	

02/05/2016	
The date of each amendment(s) adoption:	, if other than the
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 document's effective date on the Department of State's records.	ot 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 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
Dated Signature (By a director, president arginer of in the lands of a raceiver, trustee, or other court appointed fiduciary by that fiduciary)	
Martin Sampson	
(Typed or printed name of person signing)	
President	
(Title of pursua signing)	