P15000 094 997

(Requestor's Name)

_____
(Address)

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(Address)

_____
(City/State/Zip/Phone #)
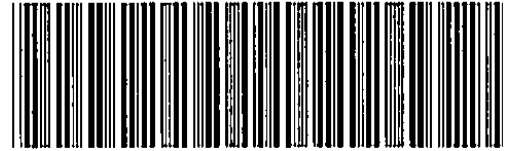
☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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CEG... ...
TALLAHASSEE...

... 2019

COVER LETTER

NAME OF CORPORATION: Apex Brokerage, Inc.

DOCUMENT NUMBER: P15000094997

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Rummell
_____
Name of Contact Person

Apex Brokerage, Inc.
_____
Firm/ Company

320 W. Bearss Avenue
_____
Address

Tampa, Florida 33613
_____
City/ State and Zip Code

david@theapexbrokerage.com
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Rummell   at (813) 9511164
_____
Name of Contact Person   Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

■ $35 Filing Fee   ☐ $43.75 Filing Fee &   ☐ $43.75 Filing Fee &   ☐ $52.50 Filing Fee
                      Certificate of Status   Certified Copy   Certificate of Status
                                                 (Additional copy is   Certified Copy
                                                 enclosed)   (Additional Copy
                                                                           is enclosed)

Articles of Amendment
to
Articles of Incorporation
of

Apex Brokerage, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P15000094997

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following am its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Not Applicable _____The

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conta word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

_____ *N/A* _____

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

Page 1 of 4

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

Example:

X Change	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change ___ Add X Remove	CEO	Melisa Hartsell	320 W. Bearss Avenue Tampa, FL 33613
2) ___ Change X Add ___ Remove	~~CEO~~	~~CEO Rummell~~ Helen Rummell	320 W. Bearss Avenue Tampa, FL 33613
3) ___ Change X Add ___ Remove	S	Yein Ross	1727 Coachman P Ste. 114 Clearwater, FL 3.
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)*

N / A

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)

N /A

The date of each amendment(s) adoption: _____ , if
date this document was signed.

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 b
document's effective date on the Department of State's records.

Adoption of Amendment(s)   **(CHECK ONE)**

[X] 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
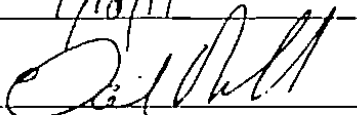
by _____."
(voting group)

[ ] The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder
action was not required.

[ ] The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder
action was not required.

Dated _____ 9/18/19

Signature _____
(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)

_____David Rummell_____
(Typed or printed name of person signing)

_____ David Rummell – Incorporator _____
(Title of person signing)