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(Re	equestor's Name)			
(Ad	ldress)			
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(Cit	ty/State/Zip/Phone	e #)		
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JUL - 9 2019

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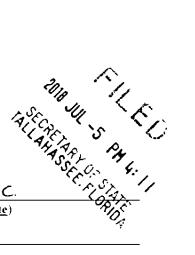
TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATI	on: Con	Petitor Sol	UtiONS INC	
DOCUMENT NUMBER:	P160	000084759		
The enclosed Articles of Art	nendment and fee are su	binitted for filing.		
Please return all correspond	ence concerning this ma	tter to the following:		
_	Psul Vsiro Name of Contact Person			
Competitor Solutions INC.				
	<u> 2681</u>	Ruoseucit Address	- BIV2 # 4311	
_	Clear	City/ State and Zip Coo	33760	
	\sim		. COM t notification)	
For further information con-	cerning this matter, pleas	se call:		
Page Name of Co		at (727	ode & Davtime Telephone Number	
Enclosed is a check for the			,	
S35 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)	
	ent Section of Corporations	Amen Divisi	: Address dment Section on of Corporations n Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



(Name of Corporation as currently filed with the Florida Dept. of State) D160m084750

		10000113	
	(Document Nun	iber of Corporation (if I	known)
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes	s, this <i>Florida Profit Ce</i>	orporation adopts the following amendment(s)
A. If amending name, enter the new na	me of the corporation	on:	
			The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ition "Corp," "Inc."	" or "Co". A professi	or "incorporated" or the abbreviation
B. Enter new principal office address, i (Principal office address MUST BE A ST	f applicable: TREET ADDRESS \		Roosevelt Bluz
(Frincipal typice address most the ASI	KELT ADDRESS)	#431	<u>l</u>
		Clear	uster F1 33760
C. Enter new mailing address, if applic (Mailing address MAY BE A POST C		2681	Rooseval+ Blud
		# 43	211
			rwater Fl 33760
D. If amending the registered agent and	l/or registered office	e address in Florida, e	nter the name of the
new registered agent and/or the new	_		
Name of New Registered Agent		Usiro	
	2681 Roc	osevelt Blv.	1, Cleanwoter Fl 33760
	(1-10)	iaa sireet aaaressi	
New Registered Office Address:		(City)	, Florida (Zip Code)
		(Слу)	τεφ Code
New Registered Agent's Signature, if ch	anging Registered .	Naent:	
I hereby accept the appointment as registe			e obligations of the position.
	1 / 4		
	Signature of .	New Registered Agent,	if changing
	1/		

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 Doc	
X Remove	<u>V</u>	Mike Jones	
_ <u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	7	Jeffrey Doty	11701 Belcher RLS.
Add			#113
X Remove			19190 Fl 38773
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional	ding additional Articles, heets, if necessary). (Bo	<u> viavi viiange(s) n</u> e specific)	<u>viv</u> ,		
Attach adamona s	reets, y necessary). (1)	e specific)			
			· · · · · · · · · · · · · · · · · · ·		
					
					
					
					
		_ 			
				<u> </u>	
If an amendment j	orovides for an exchange	e, reclassification,	or cancellation of	issued shares,	
provisions for im	olementing the amendme	ent if not containe	d in the amendme	ent itself:	
(if not applied	ble, indicate N/A)				
					
					
			<u> </u>		

The date of each ame	ndment(s) adoption: 5-1-18	, if other than the
date this document was	signed.	
Effective date <u>if appli</u>	cable: 5 -1-1 &	
<u> </u>	(no more than 90 days after amendment file date)	
	rted in this block does not meet the applicable statutory filing requirements, this date on the Department of State's records.	te will not be listed as the
Adoption of Amendm	ent(s) (CHECK ONE)	
	was/were adopted by the shareholders. The number of votes cast for the amendment(s was/were sufficient for approval.	s)
	was/were approved by the shareholders through voting groups. The following stateme provided for each voting group entitled to vote separately on the amendment(s):	3nt
"The number of	of votes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) vaction was not requi	was/were adopted by the board of directors without shareholder action and shareholdered.	tr
The amendment(s) was not requi	was/were adopted by the incorporators without shareholder action and shareholder red.	
Date	1 6-28-18	
Signa	ature Du Ja	
	(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 cour appointed fiduciary by that fiduciary)	t
	Paul vairo	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	