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| Special Instructions to Filing Officer: |
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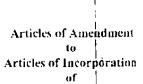
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TO: Amendment Section Division of Corporations

| • | | | |
|---------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| NAME OF CORPORA | ATION: PEACE OF MIND | INVESTMENT GROUI | P, INC |
| DOCUMENT NUMBI | ER: P16000088575 | | <u> </u> |
| The enclosed Articles of | f Amendment and fee are su | bmitted for filing, | |
| Please return all corresp | ondence concerning this ma | tter to the following: | |
| } | OEL PEREZ | | |
| _ | | Name of Contact Pers | son |
| S | SEGURO QUE SI INC | | |
| - | | Firm/ Company | |
| 1 | 248 S JOHN YOUNG PKW | | |
| _ | | Address | |
| <u> </u> | CISSIMMEE, FL 34741 | | |
| | | City/ State and Zip Co | nde |
| DJEW | ETT12@GMAIL.COM | | |
| | E-mail address: (to be us | sed for future annual repo | ort notification) |
| | | | |
| For further information | concerning this matter, pleas | se call: | |
| NOEL PEREZ | | at (321 | 443-9130 |
| Name of | Contact Person | Arca (| Code & Daytime Telephone Number |
| Enclosed is a check for | the following amount made p | payable to the Florida De | partment of State: |
| ■ \$35 Filing Fee | ☐S43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Amen Divisi P.O. I | ng Address Idment Section Ion of Corporations Box 6327 Inassec. F1. 32314 | Ame Divis Clifti 26¢1 | et Address ndment Section sion of Corporations on Building Executive Center Circle shassee, FL 32301 |



PEACE OF MIND INVESTMENT GROUP, INC.

| (Name of Corporation as current | ly filed with the Florida Dept. of S | itate) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------|
| P16000088575 | | |
| (Document Number of | f Corporation (if known) | |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts | the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | | |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation | *Co": A professional corporation | |
| B. Enter new principal office address, if applicable: | 6925 Lake Ellenor Dr | 20 E |
| (Principal office address MUST BE A STREET ADDRESS) | Suite 450 | 2019 SEP 2 |
| | Orlando, FL 32809 | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 6925 Lake Ellenor Dr | 3 PH 4 |
| | Suite 450 | 2 |
| | Orlando, FL 32809 | |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address | | the |
| Name of New Registered Agent | | |
| (Florida su | rect address) | |
| New Registered Office Address: | (Cing), | ida |
| | | • |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar | | ne position. |
| | | |
| Signature of New I | Registered Agent, if changing | |

| address of each Officer (Attach additional sheet) Please note the officer/d P = President: V = Vice Executive Officer; CFO held. President, Treasur Changes should be note; I change, Mike Jones le Mike Jones, V as Remov | and/or I s, if neces, irector til Presiden = Chief er, Direct d in the fo | Director being added: isary) tle by the first letter of the office title it: T= Treasurer; S= Secretary: D= Financial Officer. If an officerdir tor would be PTD. bliowing manner. Currently John D | the of each officer/director being removed and title, name, and le: Director: TR= Trustee: C = Chairman or Clerk: CEO = Chief rector holds more than one title, list the first letter of each office Doe is listed as the PST and Mike Jones is listed as the V. There is the V and S. These should be noted as John Doe, PT as a Change. |
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| Example: X_Change | <u>PT</u> | John Doc | |
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>SV</u> | Sally Smith | |
| Type of Action Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | <u></u> | |
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| The date of each amendment(s) a date this document was signed. | doption: | | , if other than the |
|-----------------------------------------------------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------------------|--------------------------|
| Effective date if applicable: | | | |
| | (no more than 90 | days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the D | | ble statutory filing requirements, this date w | ill not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | | |
| The amendment(s) was/were act by the shareholders was/were s | | number of votes east for the amendment(s) | |
| ☐ The amendment(s) was/were apmust be separately provided for | proved by the shareholders throur each voting group entitled to vo | ngh voting groups. The following statement ote separately on the amendment(s): | |
| "The number of votes cas | t for the amendment(s) was/were | sufficient for approval | |
| by | (voting group) | | |
| | (voting group) | | |
| ☐ The amendment(s) was/were action was not required. | lopted by the board of directors v | vithout shareholder action and shareholder | |
| ☐ The amendment(s) was/were ac action was not required. | lopted by the incorporators witho | out shareholder action and shareholder | |
| 9/18/2019 | | | |
| Dated | <i> </i> /_/ | \. | |
| | NWII, | | |
| Signature(By a | director president or other office | er – if directors or officers have not been | |
| select | | hands of a receiver, trustee, or other court | |
| | NOEL PEREZ | | |
| | (Typed or printed na | ame of person signing) | |
| | PRESIDENT | | |
| | (Title of | f person signing) | |
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