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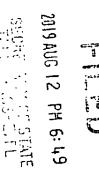
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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF COR	PORATION: CAZLE INC		
DOCUMENT N	UMBER: P17000000162		
The enclosed Arti	icles of Amendment and fee are su	bmitted for filing.	
Please return all e	orrespondence concerning this ma	tter to the following:	
	Pierre L Cook		
		Name of Contact Perso	n
	Cazle Inc		
		Firm/ Company	
	816 35th Ave Dr W		
		Address	
	Palmetto, Florida 34221		
		City/ State and Zip Cod	le
n	ılme l@verizon.net	·	
- -	-	sed for future annual report	notification)
For further inform	nation concerning this matter, pleas	se call: at (at	4658333
Name of Contact Person Area Code & Daytime Telephone Nu			ode & Daytime Telephone Number
Enclosed is a chec	ck for the following amount made	payable to the Florida Dep	artment of State:
□ \$35 Filing Fe	e □\$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Cliftor	Address dment Section on of Corporations on Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	(Name of Corporation as currently	y filed with the Florida Dept. of State)	
Cazle Inc.	P17000000162		
	P1700000162 (Document Number of	Corporation (if known)	
Pursuant to the proviits Articles of Incorpo	sions of section 607.1006, Florida Statutes, this I		llowing amendment(s) t
A. If amending nan	ne, enter the new name of the corporation:		
			The new
"Corp.," "Inc.," or	nguishable and contain the word "corporation Co.," or the designation "Corp," "Inc," or "C professional association," or the abbreviation "i	Co". A professional corporation name	the abbreviation must contain the
	ipal office address, if applicable:		
(Principal office add	tress MUST BE A STREET ADDRESS)		20
			S AUG
			- <u> </u>
	ing address, if applicable:		. 70
(Mailing agaress	S <u>MAY BE A POST OFFICE BOX</u>)		
			트를 5
D. If amending the	registered agent and/or registered office addr	ess in Florida, enter the name of the	
	gent and/or the new registered office address:		
Name of Ne	w Registered Agent		
	(Florida stre	eet address)	
New Registe	red Office Address:	, Florida	
New Registe		(City)	(Zip Code)
N 18 ** 1.8			
New Registered Ago Thereby accept the a	ent's Signature, if changing Registered Agent: appointment as registered agent. I am familiar w	with and accept the obligations of the pos	ition.
		. 0	
	Simotura of Nam D.	egistered Agent, if changing	_
	Signature of New Re	egisteren agent, ij enunging	

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VPD	Halold Fischer	816 35th Ave Dr W
Add			Palmetto, Florida
x Remove			34221
2) Change	V	Rodney D Henson	5341 NW 79th Ave
Add	 		Doral, Fl
x Remove			33166
3) Change	VPD	Lauren M Taylor	1432 Wildmedow Place
			Encinitas, Ca
Remove			92024
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Ramova			

If an amendment provides for an exchange, reclassification, or can provisions for implementing the amendment if not contained in the (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the (if not applicable, indicate N/A)	
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provisions for implementing the amendment if not contained in the (if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	ellation of issued shares.
1	amendment itself:
N/A	

The date of each amendment(s)	adoption: 9/9/2019	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the I	block does not meet the applicable statutory filing requirements, to Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amend sufficient for approval.	ment(s)
	pproved by the shareholders through voting groups. The following sor each voting group entitled to vote separately on the amendment(s	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shar	eholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and sharehol	der
8/09/2019	9	
Dated		
Simon &	\mathcal{L}	
Signature <u>1</u> (By a	director, president or other officer - if directors or officers have not	t been
selec	ted, by an incorporator - if in the hands of a receiver, trustee, or other	
арро	inted fiduciary by that fiduciary)	
	Pierre L Cook	
	(Typed or printed name of person signing)	
	President, Secretary and Director	
	(Title of person signing)	