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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: VALHALLA INIT	TIATIVE INC.		
DOCUMENT NUMB				
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	James K Downey			
,		Name of Contact Person	1	
	Valhalla Initiative, Inc			
-	-	Firm/ Company		
	P.O. Box 536782			
		Address		
	Orlando, Florida 32853-6782			
·		City/ State and Zip Cod	e	
knight	fan23@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
James K Downey		at (³²¹	662-9110	
Name o	f Contact Person	at (321) 662-9110 Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Valnalia initiative, Inc.	Corporation as auren	ntly filed with the Florida D	ant of State)
P17000014838	i Corporation as curre	ntly tiled with the Florida D	ept. of State)
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation	adopts the following amendment(
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designation of "chartered," "professional associat	ation "Corp," "Inc," or	· "Co". A professional corp	rporated" or the abbreviation
B. Enter new principal office address, i (Principal office address MUST BE A ST		N/A	
Trincipal office address MOST BE A 31	REET ADDRESS)		5 d cq _ cq = 6
			8
Throw now mailing address if annie	anhla.		100 T
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		N/A	
			- J
			3
 If amending the registered agent and new registered agent and/or the new 			name of the
	N/A	7354	
Name of New Registered Agent			
	(Florida	street address)	
New Registered Office Address:	1005 Leinhart Ct Oviedo	•	32765
		(City)	, Florida(Zip Code)
Now Domintoned America Circumstance 10. 1	anaina Dari II. Sa		
New Registered Agent's Signature, if che I hereby accept the appointment as registe			ons of the position.
Ţ			
	Signature of New	Registered Agent, if changin	σ

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
l) Change	N/A	N/A	N/A
Add			
Remove			
2) Change	N/A	N/A	N/A
Add			
Remove	N1/A	NVA	
3) Change	N/A	N/A	N/A
Add			
Remove			
4) Change	N/A	N/A	N/A
Add			
Remove			
5) Change	N/A	N/A	N/A
Add			
Remove			
6) Change	N/A	<u>N</u> /A	<u>N/A</u>
Add			
Remove			

, rithach additional sheets, if hecessary,	icles, enter change(s) h (Be specific)			
A				
				_
	. <u> </u>	<u> </u>		
				
		<u> </u>		
				
<u>If an amendment provides for an exch</u>	ange, reclassification,	or cancellation of issu	<u>ied sh</u> ares,	
	ndment if not contains	<u>d in the amendment i</u>	<u>tself:</u>	
provisions for implementing the ame				
or implementing the ame (if not applicable, indicate N/A)				
or implementing the ame (if not applicable, indicate N/A)				
provisions for implementing the ame (if not applicable, indicate N/A)				
or implementing the ame (if not applicable, indicate N/A)				
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(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
provisions for implementing the ame				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

	N/A	
The date of each amendment(s) adopti date this document was signed.	on:	, if other than the
10/16/20	17	
Effective date if applicable:	- '	
	(no more than 90 days after amendmen	it file date)
Note: If the date inserted in this block document's effective date on the Departr	does not meet the applicable statutory filing renent of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east int for approval.	or the amendment(s)
	d by the shareholders through voting groups. The voting group entitled to vote separately on the	
"The number of votes cast for the	ne amendment(s) was/were sufficient for approve	d
by	(voting group)	,,,
	(voting group)	_
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder ac	tion and shareholder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action	and shareholder
10/16/2017		
Dated		
a:		
Signature	r, president or other officer directors or offi	gary have not hoon
selected, by	an incorporator – if in the hands of a receiver, to	ustee, or other court
	duciary by that fiduciary)	actor, or built court
Jamo	s K. Downey	
	(Typed or printed name of person signing)
Vice	President	
	(Title of person signing)	