P17000024679

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J. FASON
JUN 2 : 2277

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Suxessful Group C	orp.				
	BER: P17000024679		<u> </u>			
The enclosed Article:	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	Bassem I Fayad					
		Name of Contact Person	<u></u>			
	Suxessful Group Corp.					
	Firm/ Company					
	16950 N Bay Rd, Suite 503					
	Address					
	Sunny Isles Beach, FL 33160					
	City/ State and Zip Code					
	suxessfulgroup@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
Bassem I Fayad		at (de & Daytime Telephone Number			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 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)			
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of

Suxesst	ul	Group	Corp.

(Name of State of Sta	- C.C	Al. Glad with the Plants Dane - CC		
· ·	of Corporation as curren	tly filed with the Florida Dept. of S	<u>tate)</u>	
P170000246791				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006. Florida Statutes, this	s Florida Profit Corporation adopts	the following amendment(s) to	
A. If amending name, enter the new na	ame of the corporation:		an a	
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Torp, " "Inc," or "Co".	A professional corporation name	The new e abbreviation "Corp.," must contain the word	
B. Enter new principal office address.	• •			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		Suite 503		
		Sunny Isles Beach, FL 33160		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		16950 N Bay Rd		
		Suite 503		
		Sunny Isles Beach, FL 33160		
D. If amending the registered agent an new registered agent and/or the new			<u>the</u>	
Name of New Registered Agent	Bassem I Fayad		207	
	16950 N Bay Rd, Suite 5	03	<u> </u>	
	(Florida s	treet address)	——————————————————————————————————————	
New Registered Office Address:	Sunny Isles Beach	. Floi	33160 😊	
		(City)	(Zip Code)	
			= 3.0	
			53 †	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			he nosition	
Thereby accept the appointment as register	2 law		ic positiva.	
	Signature of New	Registered Agent, if changing		
Check if applicable The amendment(s) is/are being filed p	Ŭ			

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		-		
Remove				

	# 82-0819584	
lease add EIN number to reflect on document and article of corporation. EIN hanks in advance for your help in the updates.	# 82-0819584	
Thanks in advance for your help in the updates.		
Thanks in advance for your help in the updates.		
I hanks in advance for your help in the updates.		
 If an amendment provides for an exchange, reclassification, or cancella provisions for implementing the amendment if not contained in the am 	endment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment file da	ne)
Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shar action was not required.	eholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the aby the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amenda	
"The number of votes cast for the amendment(s) was/were sufficient for approval	2021
by" (voting group)	2021 LZAY 1.0
(voting group)	-0
Dated 05/04/2021 Signature B. Lynn	AH11:42
Signature (By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee, of appointed fiduciary by that fiduciary)	ve not been
(Typed or printed name of person signing)	
(Title of person signing)	