P17000028850

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NVISICN OF CORPORATION

MAY 2 4 2017

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FSDG Holdings	Inc.			
DOCUMENT NUMB	P17000028850				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	pondence concerning this ma	tter to the following:			
	Deborah Rappaport				
-	,	Name of Contact Perso	n		
	Benetrends Financial				
-		Firm/ Company			
	1180 Welsh Road, Suite 280				
_	Address				
1	North Wales, PA 19454				
_	· · · · ·	City/ State and Zip Cod	e		
meohe	n@hfcholdings.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information Deborah Rappaport	concerning this matter, pleas	267	498-0090		
	Contact Person	at (at (de & Daytime Telephone Number		
	the following amount made		•		
□ \$35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

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Articles of Amendment to Articles of Incorporation of

FSDG Holdings Inc.				
	of Corporation as currently	y filed with the Florida Dept. of State)	***************************************	
P17000028850				
	(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607 as Articles of Incorporation:	7.1006, Florida Statutes, this	Florida Profit Corporation adopts the following an	mendment(s)	
. If amending name, enter the new n	ame of the corporation:			
		Th	ie new	
	nation "Corp," "Inc," or "	n." "company," or "incorporated" or the abbr Co". A professional corporation name must con P.A."		
. <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u>			*	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		455 NE 5th Avenue, Suite D304		
		Delray Beach, FL 33483		
			سبا راه راه <u>همين</u>	
If amending the registered agent an	rd/or registered office addr	ore in Florida, output the name of the		
new registered agent and/or the new				
Name of New Registered Agent	Jonathan Louis		9	
	7777 Glades Road, Suite 315-B			
	(Florida stre	eet address)	်ပ် နို	
New Revistered Office Address:	Boca Raton	Florida 33434	\)	
	((City) (Zip Code) ;	
New Registered Office Address:		, Florida		
ew Registered Agent's Signature, if cl				
		ith and accept the obligations of the position.		
<i>→</i> a a	MATHAN D.	LOUIS, P.M.		
	922			
	Signature of New Re	egistered Agent, if changing		
Jona	than Louis, P.	4 .		
	many bonis.	President		

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>	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					

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	-		
				·
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				=
	·			44
				<u> </u>
				<u></u>
If an amendment provides for an exch provisions for implementing the amer	ange, reclassification, or	cancellation of iss	ued shares, itself:	
(if not applicable, indicate N/A)		***************************************	******	
·				
			··· .	
			. <u></u>	
		•		···

The date of each amendment(s) a	doption:	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this to document's effective date on the De	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	March 31, 2017	
Signature		
	irector, president or other officer - if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Mark Cohen	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	