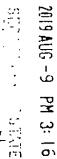
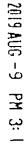
7000 na

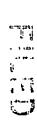
(Requestor's Name)		
(Address)		
(Address)		200 1000
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)	08/09/1	901818007 *+43
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		2019 AUG
	S TALLENT	
	AUG 1 4 2019	PM 3: 16
	1	

Office Use Only





**43.75



COVER LETTER

TO: Amendment Section

Division of Corporations

N' AMERICAN CANDOL	DRATION: ENDICTUS CORI)	
	P17000029421		
DOCUMENT NUM	IBER:		
The enclosed Article	s of Amendment and fee are sul	bmitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
	NICOLE MARIE ORTIZ		
		Name of Contact Person	
	ENDICTUS CORP		
		Firm/ Company	
	PO BOX 11332		
		Address	
	ALEXANDRIA, VA 22312-0	0932	
		City/ State and Zip Code	:
NO	RTIZ@ENDICTUS.COM		
	E-mail address: (to be us	ed for future annual report	notification)
For further informati	on concerning this matter, pleas	e call:	
NICOLE MARIE O	RTIZ	at (678-3363
Namo	e of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check (for the following amount made p	payable to the Florida Depa	rtment of State:
□ \$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)
<u>M</u> :	ailing Address	Street	Address
Ar	nendment Section		ment Section
Division of Corporations P.O. Box 6327			n of Corporations Building
Tallahassee El 32314		Clifton Building	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ENDICTUS CORP

\ <u></u>	or Corporation as curren P 7000		,		
· •	(Document Number	of Corporation (if known)	•	_
Pursuant to the provisions of section 607. is Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corpora	tion adopts the following am	endment(s))
A. If amending name, enter the new na N/A	ime of the corporation:		Th.	e new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional c	ncorporated" or the abbre	viation	l(s)
B. Enter new principal office address,	if annlicable:	N/A			
(Principal office address MUST BE A S			<u>ين</u> در ا	7n 19	
					7
				9	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A 	· ·	P. :	
			: :*; -	ယ္	27
			7 1.7 697	o)	
D. If amending the registered agent an			he name of the		
new registered agent and/or the ney	<u>v-registered office addre</u> JOSE O ORTIZ	<u>88:</u>			
Name of New Registered Agent	11330 WHISTLING PE	NE WAY			
	(Florida :	street address)			
New Registered Office Address:	ORLANDO		32832-600:	2	
	(City)	(Cuy)	(Zip Code,	, 	
New Registered Agent's Signature, if c			e de la companya de		
I hereby accept the appointment as regist	erea ageni. Tam jamiital	r with and accept the obti	gations of the position,		
		First .			
** ***	Signatury of New	Reginer d Agent, if char	nging		

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: <u>X</u> 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)	Title	<u>Name</u>	<u>Addres</u> s	
1) N/A Change	N/A	N/A	N/A	
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add			-	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A
· · · · · · · · · · · · · · · · · · ·

The data of each amondment	N/A	, if other than t
The date of each amendment late this document was signed		, ii odici man
iate this document was signed	N/A	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	vill not be listed as t
adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote:	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
, Dated	AUGUST 3, 2019	
<u> </u>		
Signature _	//W///lb	
	By a director, president or other officer – if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ppointed fiduciary by that fiduciary)	
	NICOLE MARIE ORTIZ	
	(Typed or printed name of person signing)	
	PRESIDENT, CEO	
	(Title of person signing)	