Florida Department of State

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COR AMND/RESTATE/CORRECT OR O/D RESIGN COSTUS, INC.

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COVERLETTER

O: Amendment Secti Division of Corpo	on Prations				
AME OF CORPOR	COSTUS, INC.		· · · · · · · · · · · · · · · · · · ·		
OCUMENT NUME	BER:				
ne enclosed Articles	of Amendment and fee are sub	mitted for filing.			
ease return all corre	spondence concerning this matt	er to the following:			
	MARK B. GOLDSTEIN				
		Name of Contact Person			
	MARK B. GOLDSTEIN PA				
		Firm/ Company			
	2700 N. MILITARY TRAIL S	SUITE 130			
	<u></u>	Address	· · · · · · · · · · · · · · · · · · ·		
	BOCA RATON, FL 33431				
		Ciry' State and Zip Code			
	. 61.	. .			
ango	la@bizaviaw.com	ed for future annual report	notification)		
	g-man address, to be as	en 141 1810			
or further information	on concerning this matter, pleas	e call:			
Angela Warshofski		at (⁵⁶¹	989-9955 de & Daytime Telephone Number		
Name	of Contact Person	Arca Code & Daytime Telephone Num			
Enclosed is a check f	for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	S43.75 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		Anten	: Address dment Section		
Di	Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			
1.0	Himinoton, a see .		nassee, FL 32301		

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Articles of Amendment to Articles of Incorporation of

COSTUS, INC.		
(Name of Corporation as currently	filed with the Florida Dept. of State)	
(Document Number of C	Corporation (if known)	- '*
Pursuant to the provisions of section 607.1006, Florida Starutes, this F_{ij} its Articles of Incorporation:	orida Profit Corporation adopts the following amend	ment(s)
A. If amending name, enter the new name of the corporation:		
	The r	new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp,," "Inc.," or "Co	o . A projessional corporation mane man commen	tion the
word "chartered," "professional association," or the abbreviation "F	.A."	* 4.
B. Enter new principal office address, if applicable:		· -
(Principal office address MUST BE A STREET ADDRESS)		
		,
		<u>j</u>
C. Enter new mailing address, if applicable:	<u>.</u>	<u>-</u> ນີ້
(Mailing address MAY BE A POST OFFICE BOX)		
		<u>n</u> ::
		, ·
	the state of the	
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	in Florida, enter the name of the	
Name of New Registered Agent		
(Florida stre		
(rioria2 str		
New Registered Office Address:	(City) , Florida (Zip Code)	
· ·	Chy	
New Registered Agent's Signature, if changing Registered Agent.		
Thereby accept the appointment as registered agent. I am familiar v	ith and accept the obligations of the position.	
Signature of New R	egistered Agent, if changing	

address of each Officer (4ttach additional sheet Please note the officerle P = President; V= Vice Executive Officer: CFC held. President, Treasus Changes should be note a change. Mike Jones le Mike Jones, V as Remo	ers and/or D is, if necess lirector title e Presiden 0 = Chief irer, Direct ed in the fo	ary) e by the first letter of the office title: : T= Treasurer: S= Secretary: D= Director: TR= Financial Officer. If an officer/director holds more or would be PTD. Howing manner. Currently John Doe is listed as the orporation, Sally Smith is named the V and S. These	Trustee: C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is
Example: <u>X</u> Change	<u>PT</u>	John Doc	
X Remove	\underline{v}	Mike Jones	
_X Add	<u>sy</u>	Sally Smith	
Type of Action	Title	<u>Name</u>	Address
(Check One) X	₽\$T	MARK B. GOLDSTEIN	2700 N. MILITARY TRAIL
1) X Change			SUITE 130
Add			BOCA RATON FL 33431
Remove 2) X Change	VP	MICHAEL MCCAULEY	2700 N. MILITARY TRAIL
			SUITE 130
Add Remove			BOCA RATON, FL 33431
3)Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			

.____ Remove

___ Remove

6) ____ Change _____ Add

(Attach additions	adding additional Art of sheets, if necessary).	(Be specific)				
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<u> </u>						
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C 16 an amande	ent provides for an e	vchonge reclass	fication, or cand	ellation of issue	i shares.	
provisions fo	r implementing the A	mendment ii not	contained in the	amendment its	elf:	
(if not ap	plicable, indicate N/A))				
	<u> </u>					—
				,		
						_

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(((H17000166261 3))) ____, if other than the The date of each amendment(s) adoption: _ date this document was signed. 6/22/2017 Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. (CHECK ONE) Adoption of Amendment(s) The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes east for the amendment(s) was/were sufficient for approval (voning group) The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. 6/22/17 Dated \$ignature (By a director, president or either officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) MARK B. GOLDSTEIN (Typed or printed name of person signing) PRESIDENT (Title of person signing)