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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: MDT Direct Marke	eting, Inc.	
DOCUMENT NUMB	ER:		
	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	Todd Beauregard		
•	-	Name of Contact Person	1
	<u> </u>	Firm/ Company	
	4300 N. Ocean Drive, Apartn	nent 17K	
		Address	
	Fort Lauderdale, Florida		
•		City/ State and Zip Code	2
tbeaur	regard98@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Keith T. Grumer		954 at (331-2509
Name of Contact Person		at (954) 331-2509 Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tailahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 OCT -8 PM 12: 04

Articles of Incorpora of MDT Direct Marketing, Inc.

(<u>Name</u>	of Corporation as currently	filed with the Florida	Dept. of State DE GARRY	JE STA
P17000060281			TALLAHASS	stt.f
	(Document Number of C	Corporation (if known)	-	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corporati	on adopts the following amendme	ent(s) to
A. If amending name, enter the new n	ame of the corporation:			
TB Direct Marketing, Inc.			The new	1.1
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the desigr word "chartered," "professional associa	nation "Corp," "Inc," or "Co	o". A professional coi	corporated" or the abbreviation	71
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>				
C. Enter new mailing address, if appliance (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new registe	OFFICE BOX) id/or registered office address:	ss in Florida, enter the	name of the	
Name of New Registered Agent	Keith T. Grumer, Esq.			
	100 N.E. 3rd Avenue, Suite			
	tFlorida stree.	t address)	22201	
New Registered Office Address:	Fort Lauderdale	City)	, Florida 33301 (Zip Code)	
	(0	uy)	(ZIP Code)	
New Registered Agent's Signature, if c	ered actifi. Ifim familiar wit	th and accept the obliga		

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 Doc		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3)Change			·	
Add				
Remove				
4) Change				
Add			_	
Remove				
5) (1)				
5) Change				·
Add				
Remove				
δ) Change				
Add				
Remove				

famending or adding additional Arti- attach additional sheets, if necessary).	(Be specific)			
_				
	 -			
				
	<u> </u>			·
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·				
an amendment provides for an exclusions for implementing the ame	nange, reclassificate	tion, or cancellation tained in the amen	n of issued shares, dment itself:	
(if not applicable, indicate N/A)			<u></u> _	
<u>.</u>		 		
	<u> </u>			
		<u> </u>		 -

	September 21, 2018	
The date of each amendment		, if other than
date this document was signed.	September 21, 2018	
Effective date if applicable:		
, ,	(no more than 90 days after amendment file date)	• •
	his block does not meet the applicable statutory filing requirements, be Department of State's records.	this date will not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendre sufficient for approval.	dment(s)
	e approved by the shareholders through voting groups. The following d for each voting group entitled to vote separately on the amendment(
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and sha	reholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder action a	ılder
Dated	10/4/19	
Dated	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Cianatura	Tax Biomen	
Signature	y a director, president or other officer - if directors or officers have no	ot been
	lected, by an incorporator – if in the hands of a receiver, trustee, or oth	
aç	pointed fiduciary by that fiduciary)	
	Todd Begurgood	
	Todd Beaurepard (Typed or printed name of person signing)	
	President	
	(Title of person signing)	