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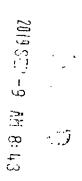
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: LOCAL GOD INC
DOCUMENT NUMBER: P 170000 66691
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Matthew DePalma Name of Contact Person
Lead God Inc.
Firm/ Company
5499 N Federal Hwy Ste A
Boca Raton, FL 33487
City/ State and Zip Code
E-mail address: (to be used for future annual eport notification)
For further information concerning this matter, please call:
Matthew DePains at 954, 729 0331  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation of

2019 SEP -9 AM 8: 43

Lead God In
(Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
New Registered Office Address: BICA Rat M. Florida 33487 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

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

(Attach additional	dding additional A sheets, if necessary	). (Be specific)	ugajaj nere.			
N/A						
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If an amandmant	provides for an ex	ahanas paalassif		O-A! 6! 4		
provisions for in	plementing the an	nendment if not c	ontained in the	macion of issued amendment itsel	snares, f:	
(if not applic	able, indicate N/A)				_	
N/A						
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				<del>-</del>		

The date of each amendment(s) adopt date this document was signed.	ion:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this block document's effective date on the Departs	does not meet the applicable statutory filing requirement of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the ent for approval.	ne amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting groups. The fol voting group entitled to vote separately on the amer	llowing statement adment(s):
"The number of votes cast for the	ne amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action	and shareholder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and s	shareholder
Dated	12019	
selected, by	r. president or other officer – if directors or officers han incorporator – if in the hands of a receiver, trustee luciary by that fiduciary)	have not been
	(Typed or printed name of person signing)	
	(Title of person signing)	