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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: Hear Agian Engine	eering Inc	
DOCUMENT NUMBE			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
H	elen Waddell		
-		Name of Contact Person	1
_		Firm/ Company	
P	restige Accounting & Book	keping Inc	
		Address	
7	134 W Menab Rd, Tamarac	, FL 33321	
_		City/ State and Zip Code	2
prestige	acct@comcast.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
Helen Waddell		at (954	de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 17 OCT -3 PH 1:13

SHEREIALT IN SHAFE TRELABASS T FERRIDA

(Name of Corporat	ion as currently filed with the Florida Dept. of State)
Hear Again Engineering Inc	
(Docur	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
Hear Again Innovations Inc	The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional Association," or the	rd "corporation," "company," or "incorporated" or the abbreviation or "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
	(Fromus street address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(-,-,,
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
·	· ,
Sign	ature 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	PT	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change		_		_	
Add					
Remove					-
2) Change		_		_	
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add		_			
Remove					
Kemove					
6) Change				_	
Add					
Remove					

	itional sheets,	, if necessary).	cles, enter change((Be specific)			
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OAIZIOUZ	lment provide for implement applicable, in	nting the amend	nge, reclassificatio dment if not conta	n, or cancellation ined in the amend	n of issued share Iment itself:	<u>·s.</u>
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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	The second secon	. <u>.</u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this dat epartment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.)
☐ The amendment(s) was/were ap must be separately provided to	proved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholde	г
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
9/29/17		
Dated	Wichelle Anton	
(By a sedec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other cour inted fiduciary by that fiduciary)	t
	Michelle Horton	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	