P17000077505

(Requ	iestor's Name)	
(Address)		
(Addr	ess)	
(City/S	State/Zip/Phon	e #)
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(Docu	ıment Number)	
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SECKETARY OF STATE
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C. GOLDEN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: IDRIVE4U.COM	INC		
DOCUMENT NUMBER: P17000077505				
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Dennis Campbell			
		Name of Contact Person	1	
		Firm/ Company		
	13800 US HWY 19 N			
		Address		
	CLEARWATER, FL 33764			
		City/ State and Zip Code	e	
dc@p	lanetbuzz.com			
~ ~~~~~	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Dennis Campbell		at (<u>727</u>	de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r 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)	
Amo Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, 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

IDRIVE4U.COM INC

2018 MAY -7 PM 4:55

	- 17 4.0
(Name of Corporation	n as currently filed with the Florida Dept. of STARY OF STATE
P17000077505	'UPFWUNDULE: EL UDIU
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida to Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s
A. <u>If amending name, enter the new name of the cor</u>	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDI</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	9
D. <u>If amending the registered agent and/or registere</u>	
new registered agent and/or the new registered o	ffice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist the appointment as registered agent. I	stered Agent: am familiar with and accept the obligations of the position.
Siona	ture of New Registered Agent, if changing
signu	iare of New Registerea 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.

X 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l)Change	S	DUFFY, BRIAN	13800 US HWY 19 N
Add			Clearwater FL 33764
X Remove			
2) Change		<u> </u>	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			<u></u>

Attach additional sheets, if necessary).					
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		<u> </u>			<u> </u>
		 			
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If an amendment provides for an excha provisions for implementing the amen	inge, reclassifica	ition, or cance	<u>llation of issued</u> imendment itsel	<u>shares,</u> f:	
(if not applicable, indicate N/A)					
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	• •	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	han 90 days after amendment file date)
(no more t	han 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's record	applicable statutory filing requirements, this date will not be listed as the ds.
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders by the shareholders was/were sufficient for approval.	. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholder must be separately provided for each voting group entitle	
"The number of votes cast for the amendment(s) wa	s/were sufficient for approval
by	
(voling group)	
☐ The amendment(s) was/were adopted by the board of direction was not required.	ectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporator action was not required.	s without shareholder action and shareholder
May 1 2018	
Dated	
(By a director, president or othe	r officer – if directors or officers have not been f in the hands of a receiver, trustee, or other court ciary)
Dennis Campbell	
(Typed or pr	inted name of person signing)
President	
	Title of person signing)