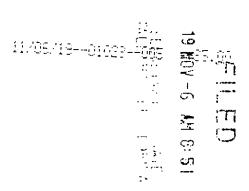
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COVER LETTER

TO: Amendment Section

Division of Corporations

¢.

NAME OF CORPORATION: APPROVED SOLUTIONS OF JACKSONVILLE, INC. DOCUMENT NUMBER: P17000090782 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RONALD W BARNES Name of Contact Person APPROVED SOLUTIONS OF JACKSONVILLE, INC. Firm/ Company 12215 MAYORS DR Address JACKSONVILLE, FL 32223 City/ State and Zip Code RWBARNES325@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (904) 838-6168

Area Code & Daytime Telephone Number RONALD W BARNES Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

APPROVED SOLUTIONS OF JACKSONVILLE, INC.

(Name o	of Corporation as currently	filed with the Florida Dept. of S	State)
P17000090782			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts	the following amendment(s) t
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	"o". A professional corporation	d" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S			
<u> </u>			
			- 3 A
C. Enter new mailing address, if appli			on : ""
(Mailing address MAY BE A POST)	OFFICE BOX)		200
			$\mathbb{Z}^{\mathbb{Z}_{+}}$ on
			2.
D. If amending the registered agent an	d/or registered office addr	ess in Florida, enter the name of	the '
new registered agent and/or the new		,	
Name of New Registered Agent	RONALD W BARNES		<u> </u>
	12215 MAYORS DR		
	(Florida stre	vet address)	
	JACKSONVILLE	rel	32223
New Registered Office Address:		, r10 City)	rida(Zip Code)
	· ·		,
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regist	ered agent. I am familiar w	ith and accept the obligations of t	the position.
	۸ -		
	11 E)	
(X)	recod W 13	2-87m	
	Signature of New R	egistered 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: XChange	<u>PT</u>	John Doc	WOV PROPERTY.
\underline{X} Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	SANDRA SALLETTE	12215 MAYORS DR
Add			JACKSONVILLE. FL 32223
X Remove			
2) Change	VP	SANDRA SALLETTE	12215 MAYORS DR
Add			JACKSONVILLE, FL 32223
X Remove			
3) Change	P	RONALD W BARNES	12215 MAYORS DR
X Add			JACKSONVILLE, FL 32223
Remove			
4) Change	VP	RONALD W BARNES	12215 MAYORS DR
X Add			JACKSONVILLE, FL 32223
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)			
N/A	, ,			
-				
			<u></u>	
		_		
		<u>-</u> _		
				
				
			19	
F. If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	;; } ;	19 KOY	٠.
provisions for implementing the ame	endment if not contained in the amendment itself:		9-1	
(if not applicable, indicate N/A) N/A		****	•	η
N/A			1	_
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		75 26		
	<u> </u>			
		· ·		

	OCTOBER 21, 2019	
	adoption:	, if other than th
date this document was signed.		
	CTOBER 21, 2019	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will Department of State's records.	l not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
bv	(voting group)	
	(voting group)	19
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder:	NOV -6
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	¥ 8:5
OCTOBI Dated	ER 21, 2019	ි. සි. සි.
Signature 🔣	Hard w Bern	
(By a selec	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 court inted fiduciary by that fiduciary)	
	RONALD W BARNES	
	(Typed or printed name of person signing)	
	SECRETARY/TREASURER	
	(Title of person signing)	