## P1800004478

(Red	questor's Name)	
(Add	dress)	
(Ad	dress)	· · · · · ·
·	11033)	
(City	y/State/Zip/Phone	<del>:</del> #)
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: 91011 GROUP, IN	IC.	
DOCUMENT NUMI			
	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	PATRICIA L. WARD		
		Name of Contact Person	n
	91011 GROUP, INC.		
		Firm/ Company	
	2000 CHENEY HWY., SUIT		
		Address	
	TITUSVILLE, FL 32780		
	<del></del>	City/ State and Zip Cod	e
admir	n@91011group.com		
<del></del>		sed for future annual report	notification
For further information Patricia L. Ward	n concerning this matter, pleas		404-0478
Name o	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:
S35 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

FILED	
2018 OCT 30 PM	

91011 GROUP, INC.

(Name of Corporation as	currently filed with the Florida Dept. of State)
P18000004478	Currently filed with the Florida Dept. of State)  TALLAHASSEE FILE  Sumber of Corporation (if known)
(Document N	Sumber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporate	ation:
N/A	The new
	orporation," "company," or "incorporated" or the abbreviation ne," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2000 CHENEY HIGHWAY, SUITE 103-278
(Principal office address MUST BE A STREET ADDRES	TITUSVILLE, FLORIDA 32780
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2000 CHENEY HIGHWAY, SUITE 103-278
<del>,</del>	TITUSVILLE, FLORIDA 32780
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent N/A	
(1	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere	
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 Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_	N/A	
Add				
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		<del>_</del>		
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	
N/A	
· · · · · ·	
F. If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	<del></del>

* * * *		
• • • • • • • • • • • • • • • • • • • •	10/26/2018	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : N/A		
	(no more than 90 days after amendment file date)	<u>_</u> _
<b>Note:</b> If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	Il not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	· ·	
,	(voting group)	
☐ The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptaction was not required.	oted by the incorporators without shareholder action and shareholder	
10/26/2018 Dated		
Signature Q	tricia de ward	
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
1	PATRICIA L. WARD	
<del>-</del>	(Typed or printed name of person signing)	
I	PRESIDENT/SECRETARY	
-	(Title of person signing)	