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(((H18000281340 3)))



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10.	

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : I20170000056

Phone : (954)842-2931

Fax Number : (954)842-2936

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COR AMND/RESTATE/CORRECT OR O/D RESIGN FLOPAN INVESTMENT, INC.

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COVER LETTER

TO: Amendment S Division of Co			
NAME OF CORP	ORATION: FLOPAN INVEST	TMENT, INC.	
	MBER: P18000011086		
The enclosed Artic	les of Amendment and fee are st	hmitted for filing.	
Picase return all co	rrespondence concerning this ma	atter to the following:	
	ALEX SORSHER		
		Name of Contact Perso	n
	FLOPAN INVESTMENT, II	NC.	
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
•	900 N FEDERAL HWY STI	E 306	
		Address	
	HALLANDALE, FL 33009		
		City/ State and Zip Cod	ę
_			
	E-mail address: (to be u	sed for future annual report	notification)
For further informa	tion concerning this matter, plea	se call:	
		at ()
Nan	ne of Contact Person	Area Co	de & Daytime Telephone Number
Bnclosed is a check	for 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)
A D P	Tailing Address mendment Section livision of Corporations O. Box 6327 allahassoc, FL 32314	Amend Division Clitton	Address Iment Section on of Corporations Building Executive Center Circle

Articles of Amendment to Articles of Incorporation of

FILED

2018 SEP 28 AM 8: 07

(Name of Corporation as currently filled P18000011086 (Document Number of Corporation Pursuant to the provisions of section 607.1006, Florida Statutes, this Florid its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "c "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co" 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)	SECRETARY OF STA
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cursuant to the provisions of section 607.1006, Florida Statutes, this Floridals Articles of Incorporation: L. If amending name, enter the new name of the corporation: ame must be distinguishable and contain the word "corporation," "corporation," "or Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co" 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:	
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Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". ord "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	
Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	The new ompany," or "incorporated" or the abbreviation A professional corporation name must contain the
. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the
Name of New Registered Agent SORSHER & ASSOCIATES, L.I	C.
900 N FEDERAL HWY STE 300	
(Florida street add	err)
New Registered Office Address: HALLANDALE	. Florida
(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with an	l accept the obligations of the position.

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 euch 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>y</u>	Mike Innes	
_X ∧dd	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	P	SERGEI GULEVICH	900 N FEDERAL HWY
Add			306
X Romove			HALLANDALE, FL 33009
2) Chauge	s	SORSHER & ASSOCIATES, L.L.C.	900 N FEDERAL HWY
X^dd			306
Remove			HALLANDALE, FL 33009
3) Change			
A dd			
Remove			
4)Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

20005/0006

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	(Attach additional sho	ects, if necessary).	cles, enter change(s) he (Be specific)			
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	(if not applicabl	c, indicate N/A)		N. The Willelie	113011.	
		-			<u> </u>	
						<u> </u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inscreed in the document's effective date on the	his block does not meet the applicable statutory filing requirements, this de Department of State's records.	ate will not be fisted as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment of sufficient for approval.	(s)
☐ The amendment(s) was/were must be separately provided	e approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehold	cr
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	9/25/2018	
Signature	Ac.	
scl	or a director, president or other officer if directors or officers have not been exted, by an incorporator if in the hands of a receiver, trustee, or other conscinted fiduciary by that fiduciary)	nt
	ALEX SORSHER	
	(Typed or printed name of person signing)	· · ·
	SECRETARY	
	(Title of person signing)	