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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

-Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Fhone : (323) 962-8600 Fax Number : (323) 962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ELNOU MANAGEMENT, INC.

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JUN 13 2018

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Help

TO: Amendment Section

COVER LETTER

| Division of Corporations | | |
|---|--|---|
| NOU MANAGEM | ENT INC | |
| NAME OF CORPORATION: NOU MANAGEM | ENT, INC. | |
| DOCUMENT NUMBER: P18000037995 | | |
| The enclosed Articles of Amendment and fee are su | bmitted for filing. | |
| Please return all correspondence concerning this made | ter to the following: | |
| Cheyenne Moseley | | |
| | Name of Contact Person | n |
| LegalZoom.com, Inc. | | |
| | Firm/ Company | |
| 101 N. Brand Blvd., 11th F | loor | |
| | Address | |
| Glendale, CA 91203 | | |
| | City/ State and Zip Cod | c |
| imam 702@hatmail.com | | |
| jmem_792@hotmail.com | ed for future annual report | natification) |
| in in the control of | ou ion interest annual report | Thompson, In |
| For further information concerning this matter, pleas | e call· | |
| • | | |
| Cheyenne Moseley | at (800 | 773-0888 ext. 9724 |
| Name of Contact Person | Area Ço | de & Daytime Telephone Number |
| Enclosed is a check for the following amount made p | payable to the Florida Depa | artment of State; |
| S35 Filing Fee S43 75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address | | Address |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations | |
| P.O. Box 6327 | | Building |
| Tallahassee, FL 32314 | | executive Center Circle |

| A melates Al A | t mandanant | | | |
|---|---|------------------|----------|----|
| Articles of A to | | | | |
| Articles of In | • | | | |
| ELNOU MANAC | | | | |
| (Name of Corporation as currently filed with the I | · | _ | | |
| P18000 | 037995 | | | |
| (Document Number of Corporation (| if known) | _ | | |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts the following | ing amend | ment(s) | to |
| A. If amending name, enter the new name of the corporation: | | | | |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name mus | | | |
| B. Enter new principal office address, if applicable: | 11419A W Palmetto Park Road, #9715 | 53 | | |
| (Principal office address MUST BE A STREET ADDRESS) | Boca Raton, FL 33497-1537 | _ | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 11419A W Palmetto Park Road, #97,15 | – 53 <u> </u> | = | |
| | Boca Raton, FL 33497-1537 | | ي ۔ | |
| | : | _== | 둘 | 7 |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address | | SSEE, F | 12 AH | |
| Name of New Registered Agent | | LOSI LOSI | و. | |
| (Florida sa | reet address) | DAC: | 23 | |
| New Registered Office Address: (City) | , Florida | _ | | |
| New Registered Agent's Signature, if changing Registered Agent | | | | |
| I hereby accept the appointment as registered agent. I am familiar | wun and accept the onlightions 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 rer | noved 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 Icaves 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 | PT Joh | n Dec | |
|-------------------------------|-----------------------|-----------------|-----------------------------|
| X Remove | <u>y</u> _ y i | ke Jones | |
| _X Add | SY Sal | ly Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) X Change | T, S, D | SOLEDAD NOUGUES | 11419A W Palmetto Park Road |
| Add | | | # 97153 7 |
| Remove | | | Boca Raton, FL 33497-1537 |
| 2) X Change | P, D | JON ELORRIAGA | 11419A W Palmetto Park Road |
| | | | #971537 |
| Remove | | | Boca Raton, FL 33497-1537 |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |
| | | | - |

Page 2 of 4

| If amending or adding additional Articles, enter | r change(s) here: |
|---|---|
| (Attach additional sheets, if necessary). (Be spec | rific) |
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| If an amendment provides for an exchange, rec provisions for implementing the amendment if | Institution, or cancellation of issued shares, not contained in the amendment itself; |
| (if not applicable, indicate N/A) | |
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| | |
| | December 2 |
| | Page 3 of 4 |
| | |

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)