## P18 000048492

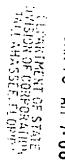
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FEB 11 2020

S. YOUNG

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPOR	ATION: Wiser Investment C	Group Inc.	
DOCUMENT NUMB	ER: P18000048492		
	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
1	Eileen Guiot		
		Name of Contact Persor	1
1	Pablo J, Valdes		
-		Firm/ Company	
	12484 NW South River Dr.		
-	<u></u>	Address	
:	Medley Fl. 33178		
-		City/ State and Zip Code	<del></del>
bmarti	nez@mparl.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Eileen Guiot		at ( <u>305</u>	455-6967
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
☐ \$35 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)
Amer Divis P.O.	ing Address ndment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co	Address ment Section in of Corporations entre of Tallahassee S. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Wiser Investment Group Inc.

(Name of Corporation as currentl	y filed with the Florida Dept. of State)
P18000048492	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this aits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:  N/A	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", & "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
(Principal office address <u>Stost Bt. ASTREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
N/A  Name of New Registered Agent  N/A	<u> </u>
(Florida str	ant address:
	eer taar (ssy
New Registered Office Address:	(City) . Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v	
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: X Change	<u>PT</u> <u>J</u>	ohn Doe	
X Remove	<u>v</u> <u>N</u>	Aike Jones	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Niurka F. Esquivel	12484 NW South River Dr.
X Add			Medley Fl. 33178
Remove			
2) Change	<u>s</u>	Lucilla Suero	12484 NW South River Dr.
X Add			Medley Fl. 33178
Remove Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

A	ling or adding a Iditional sheets,		• • •				
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-						<del></del>	
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<u>lf an ame</u>	<u>endment provi</u>	<u>des for an exch</u>	<u>iange, reclassi</u>	ficati <u>on, or can</u> c	cellation of iss	ued shares,	
provisio	ons for impleme not applicable, i	enting the ame	ndment if not	containe <u>d in th</u>	<u>e amendment</u>	<u>itself:</u>	
	от прутсите, п	<i>anicuic,</i>					
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• .

	January 8, 2020	. if other thar
The date of each amendment(s) ad date this document was signed.	option:	II Office that
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<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 variation of State's records.	vill not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were sul	pted by the shareholders. The number of votes cast for the amendment(s) ifficient 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	for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
■ The amendment(s) is/are being ti	led pursuant to s. 607.0120 (11) (e), F.S.	
☐ The amendment(s) was/were adoraction was not required.	pted by the incorporators, or board of directors without shareholder action a	and shareholder
January 8, 2 Dated	2020	
Signature		
(By a print 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)	
	Pablo J. Valdes	
•	(Typed or printed name of person signing)	
	President	

(Title of person signing)

the

the