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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: BONDEZZ CORP.
DOCUMENT NUMBER: P180000 70325
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Cynthia Elgine Smith Name of Contact Person
CEO Firm/ Company
1220 NW 5/ST Way
Deerfield Booch, FL 33442 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Cyrthia Smith Name of Contact Person at (561) 212 - 3907 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$\ \$35 \text{ Filing Fee} \$\subseteq \$\subs
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

(Name of Corporation as current)	c filed with the Florida De	nt. of A Cate 1 P.P 5	£410 1 0
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		<u> </u>	- STATE
(Document Number of	Corporation (if known)	ΓL_{1}	BIE FI
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation	adopts the following	amendment(s) to
A 16			
A. If amending name, enter the new name of the corporation:			
			The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated professional corporation	l" or the abbreviation name-must-contain	("Corp.," the word
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
		<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
(Multing datasess MAT DE ATOST OFFICE DOM)			
	-		
D. If amending the registered agent and/or registered office addr		ame of the	
new registered agent and/or the new registered office address			
Name of New Registered Agent			
(Florida str	ret address)		

New Registered Office Address:	(City)	, Florida <i>(Zip Co</i>	ode)
	, O.,., /		
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent. I am familiar w	rith and accept the obligation	ons of the position.	
Signature of New Ro	gistered Agent, if changing		
69. A 16. 31. A 1			

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doc, 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	$\underline{\mathbf{V}}$	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Att	h additional sheets, if necessary). (Be specific)	
		
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		-
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	amendment provides for an exchange, reclassification, or cancellation of issued shares, isjons for implementing the amendment if not contained in the amendment itself:	
	(if not applicable, indicate N/A)	-1
_(exadezz Corp with Board approval leques	st ar
<u>n</u>	rease of 15,000,000 authorized Shares	5.to
4	o existing 10,000,000 authorized share	<u>'S.</u>
	· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 d	ays after amendment file date)
Note: If the date inserted in this block does not meet the applicablocument's effective date on the Department of State's records.	le statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or boa action was not required.	rd of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The no by the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vot	
"The number of votes cast for the amendment(s) was/were s	sufficient for approval
by	
(voting group)	
Dated 4/1/24	
Coulded to it	_
Signature <u>Un Fua A mu Fo</u> (By a director, president or other officer	if directors or officers have not been
	ands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
Cynthia S	ne of person signing)
(1 yped or printed nar	ne or person signing)
CEO	
(Title of person signi	ng)