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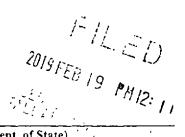
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SIMBYOTYC	, INC
DOCUMENT NUMBER: 18000071951	
The enclosed Articles of Amendment and fee at	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
MATTHEW J MONAGI	HAN, ESQ
	Name of Contact Person
CANTWELL & GOLDN	AAN PA
-	Firm/ Company
96 WILLARD ST SUITE	E 302
Address	
COCOA FL 32922	
	City/ State and Zip Code
jshye@symbuyotic.com	
	e used for future annual report notification)
For further information concerning this matter, p	piease call:
Matthew J. Monaghan, Esq	at (321) 639-1320 x 107
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
■ \$35 Filing Fee Certificate of Statu	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as curre	ently filed with the Florida Dept. of State)	
SIMBYOTYC, INC P18000071951	1. A. C.	
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	his Florida Profit Corporation adopts the following amendmen	
A. If amending name, enter the new name of the corporation:		
SYMBUYOTIC, INC.	The new	
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional ussociation," or the abbreviatio	r "Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	414 Highpoint Drive	
i incipal office address most be A STREET ADDRESS)	Ste. 2 Cocoa, FL 32926	
	Cocoa, FL 32926	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	414 Highpoint Drive	
	Ste. 2	
	Cocoa, FL 32926	
If amending the registered agent and/or registered office and new registered agent and/or the new registered office addr.		
N1/A	ess:	
Name of New Registered Agent N/A		
Florida	street address)	
	,	
New Registered Office Address:	(City) , Florida, (Zip Code)	
ew Registered Agent's Signature, if changing Registered Age		
hereby accept the appointment as registered agent. I am familia	ar with and accept the obligations of the position.	
Signature of New	v 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 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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. Ther 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 Char Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		<u>N/A</u>	
Add			
Remove			
2) Change			
, Add	,		
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	
N/A	
	
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an amendment provides for an exchange, reclassification, or cancellation of is	sued shares,
rovisions for implementing the amendment if not contained in the amendment	itself:
(if not applicable, indicate N/A)	
	
	
·	
	
	

The date of each amendment(s date this document was signed.) adoption:, if other that
_	
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in the	is block does not meet the applicable statutory filing requirements, this date will not be listed as Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) a sufficient for approval.
The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	February 7, 2019
Signature	aun ash_
(By	a director, president or other officer - if directors or officers have not been cted, by an incorporator - if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	JASON SHYE
	(Typed or printed name of person signing)
	PRESIDENT
	(Cities of parcer cirping)