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R. WHITE NOV 3 0 2013

COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: SUFE & EUSY MOVING INC. DOCUMENT NUMBER: £ 180000 80302						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Nicholas Torningasa Name of Contact Person						
12423 NW 35 Street						
Address						
COVAL SPYINGS FL 33005 City/ State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Nicholas Tornincasa a 561, 419 5504						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)						
Mailing Address Amendment Section Amendment Section						

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment

to

Articles of Incorporation

FIL	ED
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	of			En
J'afe and Easy Mo	iving inc		2018 NOV -	
	ation as currently fi	led with the Florida D	ept. of State 6	AM 11:50
p 18 0000 80369	۲		TATETAL	lin on
(Doc	cument Number of Co	orporation (if known)	- Ariass	SEE, FI
rsuant to the provisions of section 607.1006, Flor Articles of Incorporation:	rida Statutes, this Flo	rida Profit Corporation	adopts the follow	ving amendment(
If amending name, enter the new name of the	e corporation:			
				The new
ome must be distinguishable and contain the v Corp.," "Inc.," or Co.," or the designation "Co ord "chartered," "professional association," or t	orp," "Inc," or "Co the abbreviation "P.A	". A professional corp		
Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>				
	-	·		
	-			
Enter new mailing address, if applicable:	PAV.			
(Mailing address MAY BE A POST OFFICE A	<u>BOX</u>)	<u> </u>		
	-			
If amending the registered agent and/or registered agent and/or the new register		in Florida, enter the r	1ame of the	
Name of New Registered Agent				
	(Classide street			
	(Florida street e	iddress)		
New Registered Office Address:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, Florida	
	(Ci)	y)	(7.	Zip Code)
ew Registered Agent's Signature, if changing R	Registered Agent:			
ereby accept the appointment as registered agen.		and accept the obligati	ions of the positio	n.
Si	ignature of New Regi.	stered Agent, if changin	lg .	

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>	John Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	<u> </u>	ABhley	Tornincasa	12423 NW 35 ST.
Add				coral oprings FL
Remove	_	·		33(105
2) X Change	Chana	Nichola,	5 Tornincolso	1 12423 NW 35 ST
/ tau	O 10 11 13	4 110111 11 10 7		Coral Springs FL 330105
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	ional sheets, if neco	onal Articles, enter essary). (Be spec	:ific)			
					=	
<u> </u>						
				<u> </u>		
						
						
						
				•		
f an amendn	nent provides for	an exchange, recl	assification, or ca	ncellation of issu	ed shares	
provisions fo	<u>or implementing t</u>	the amendment if	not contained in t	he amendment it	self:	
(if not ap	pplicable, indicate	: N/A)				
	_ ·		· -			 -
				··		

The date of each amendment(s) adoption: Novem	ber 19	3017	, if other than the
Effective date if applicable: NOVEMBEY 14	1 20 - nan 90 days after	7 r amendment file (date)
Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's record		ory filing require	ments, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the shareholders, by the shareholders was/were sufficient for approval.	The number of	votes cast for the	amendment(s)
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitle			
"The number of votes cast for the amendment(s) was	s/were sufficient	t for approval	
hy		·	
(voting group)			
The amendment(s) was/were adopted by the board of direction was not required.	ctors without sha	areholder action a	nd shareholder
☐ The amendment(s) was/were adopted by the incorporators action was not required.	without shareho	older action and sl	narehołder
Dated NOVember 19 20	217	_	
(By a director, president or other selected, by an incorporator – if appointed fiduciary by that fiduc	in the hands of a		
Nicholas (Typed or prin	TOYNING nted name of per	C SC (rson signing)	
<u>fresider</u>	1 fille of person si	gning)	