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COVER LETTER

IO: Amendment Section Division of Corporations

NAME OF CORPORATION:	AN 4 YOU AN	D ASSOCIATES INC	
DOCUMENT NUMBER:PI	8000080740		
The enclosed Articles of Amendment a	nd fee are submi	tted for filing.	
Please return all correspondence concer	ming this matter	to the following:	
WINSTON BOL	.D		
	1	Same of Contact Persor	1
WINSTON BOL	.D		
		Firm/ Company	
10411 MOSS PA	ARK ROAD SUI	TE A-1	
		Address	
ORLANDO,FL	32832		
	(City/ State and Zip Code	2
LITOIPLAN4U@GM	AIL.COM		
E-mail addr	ess: (to be used f	or future annual report	notification)
or further information concerning this	matter, please ca	All:	
VINSTON BOLD		at (530-6244
Name of Contact Person	·	Area Co	de & Daytime Telephone Number
nclosed is a check for the following an	mount made paya	ible to the Florida Depa	artment of State:
S35 Filing Fee S43.75 File 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 Amendment Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LAN 4 YOU AND ASSOCIATES INC

(Name o	f Corporation as current	ly filed with the Florida Dept. of State)	
18000080740			
	(Document Number of	of Corporation (if known)	
rsuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following	ig amendment(s) to
If amending name, enter the new na	ime of the corporation:		The new
me must be distinguishable and contain ic.," or Co.," or the designation "C hartered," "professional association,"	"orp," "Inc," or "Co".	company," or "incorporated" or the abbreviati A professional corporation name must contai "	on "Corp.,"
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u>)		WINSTON BOLD	
		10411 MOSSPARK ROAD SUITE A-1	20
		ORLANDO, FL 32832	19 DE
Enter new mailing address, if appli (Mailing address MAY BE A POST)			2019 DEC 17 NH
If amending the registered agent an new registered agent and/or the new		dress in Florida, enter the name of the	
	ANGEL ROMAN	<u></u>	·.
Name of New Registered Agent	10411 MOSS PARK RO	AD SUITE A-I	
	(Florida s	treet address)	
New Registered Office Address:	ORLANDO	, Florida 32832	
		(City) (Zip	Code)
w Registered Agent's Signature, if e weby accept the appointment as registress.	hanging Registered Agen vered agent. I am familiar	<u>it:</u> - with and accept the obligations of the position.	
		2_	
	Signature of New	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, 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

Y Dohn Doe

Mike Jones

Mike Jones

X_Change	<u>PT</u>	John Doe				
X Remove	$\overline{\Lambda}$	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
vpe of Action Theck One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
X Change	AGTR	ANGEL ROMAN	203 S CLYDE AVE			
Add			KISSIMMEE, FL 34741			
Remove						
) Change	SC	KRYSTAL ROMAN	203 S CLYDE AVE			
Add			KISSIMMEE,FL 34741			
Remove Change	Ь	WINSTON BOLD	10411 MOSS PARK ROAD SUITE			
X Add			ORLANDO, FL 32832			
Remove			10411 MOSS PARK ROAD SUITI			
Change	SC	TAMARA C. BOLD	ORLANDO, FL 32832			
X_{Add}						
Remove						
Change						
Add						
Remove						
Change						
Add						
Remove						

Page 2 of 4

amending	<u>or adding</u>	additiona	<u>l Articles,</u>	<u>, enter c</u>	nange(s)	here:

ttach additional sheets, if necessary). (Be specific)

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n amendment provides for an exchange, reclassification, or cancellation of issued shovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	ares,
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Page 3 of 4	
Page 3 of 4 12/17/2019	
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(do	ption	οſ	Ā	men	dr	nen	t(s)
VU.	puon	α_1		HICH	uı	.,	.(3)

(CHECK ONE)

- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

Ьv	WINSTON BOLD		
O,		(voting group)	•

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

12/17/2019	
Signature	Company to the second beautiful to the second beautifu
(By a direc	tor, president or other officer - if directors or officers have not been
	y an incorporator - if in the hands of a receiver, trustee, or other court
appointed	fiduciary by that fiduciary)
33.73	METON POLD
W	INSTON BOLD
· 	(Typed or printed name of person signing)
PR	ESIDENT
(Ti	tle of person signing)