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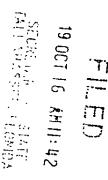
(Ře	questor's Name)	
bA)	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

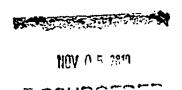
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SCAGLIONE GROUP INC
DOCUMENT NUMBER:P18000081026
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JACK SCAGLIONE Name of Contact Person
Firm/Company 6720 Maybole Place
Address Temple Terra (e, Fl. 33617 City/ State and Zip Code
E-mail address: (to be used for future annual seport notification)
For further information concerning this matter, please call:
Del Scrigione at 813 504-1647 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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) \$52.50 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

	of		
SCACILIONE	GROUP INC		
(Name of Corporation a	as currently filed with the Flo	orida Dept. of State)	
P180000810	126		
(Document	Number of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Florida State Articles of Incorporation:	atutes, this Florida Profit Corp	poration adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corp.	oration:		
			_The new
name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp," ' word "chartered," "professional association," or the abb	"Inc," or "Co". A profession		
B. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRE</u>	<u>(SS</u>)		
		 	
C. Enter new mailing address, if applicable:		~ ~~ 1	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		من <u>من من المنا</u>	
		7.A.	00
		2. 2. 0.2	<u> </u>
		<u> </u>	<u>.</u>
D. If amending the registered agent and/or registered		er the name of the	至江
new registered agent and/or the new registered off	<u>ice address:</u>		
Name of New Registered Agent		5=	-\$2 -\$4
		•	
	(Florida street address)		-
New Registered Office Address:		, Florida	
New Nextsierea Office Autaress.	(City)	, Frontal (Zip	Code)
New Registered Agent's Signature, if changing Registe			
I hereby accept the appointment as registered agent. I a	m familiar with and accept the	obligations of the position.	

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	<u>PT</u>	John Doe	
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	5_	Deena Scaylione	3062 Beach Blvd S
Add			Gulfport, FL 33707
Remove			
2) Change			
Add			
Remove			
3) Change	 		×
Add			19 0
Remove			0C7
4) Change			
Add			2 2
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
N/A			
	<u> </u>		
		-	_
	<u> </u>		
			_
			
		19	
	<u> </u>	90	٦,
	2:5.		10.00
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	:: <u>;</u>	9	
provisions for implementing the amendment if not contained in the amendment itself:	• • • •	H.3	
(if not applicable, indicate N/A)		=	U
N/A		- 53	
	- i-		
			
		_	
	 		
			-

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
In 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	
by" (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.	19 0CT
Dated 10-11-2019	5 =
Signature Jack	
(By a director, president or other officer) if directors or officers have not been == selected, by an incorporator – if in the hands of a receiver, trustee, or other court, appointed figure appointed figure by that fiduciary)	Ω
(Typed or printed name of person signing)	
President (Title of person signing)	