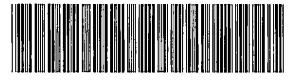
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July 23, 2020

MAT HUNTSBERGER 6478 HIGH RIDGE RD LANTANA, FL 33462

SUBJECT: ICEBURG ENTERTAINMENT, INC.

Ref. Number: P18000089672

We have received your document for ICEBURG ENTERTAINMENT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L18000078902-BERG ENTERPRISES, LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 320A00013889

Rebekah White Regulatory Specialist II Supervisor

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: ICEBURG ENTER	TAINMENT. INC	
	4BER: P18000089672		
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Mat Huntsberger	Name of Contact Persor	
	ICEBURG ENTERTAINME	NT, INC. ——Firm/ Company	
	6478 High Ridge Road.		
	Lantana, Fl 33462	Address	
	···	City/ State and Zip Code	2
For further informat	mathew.huntsberger@gmail.c E-mail address: (to be us	ed for future annual report	notification)————
Mat Huntsberger		at (_561	420-3834
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
\$35 Filing Fee	for the following amount made: \$\sumsymbol{\sumsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\sin}\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbol{\subsymbo	payable to the Florida Depa \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	artment of State: □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ai D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ICEBURG ENTERTAINMENT, INC.	22)/ 1-5 Fil 2:20
(Name of Corporation as currently filed	l with the Florida Dept. of State)
P18000089672	
(Document Number of Corp	oration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:	la Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation:	
Huntsberger Enterprises Inc., name must be distinguishable and contain the word "corporation." "compa" "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional association," or the abbreviation "P.A."	The new ony," or "incorporated" or the abbi eviation "Corp.," essional exporation name must contain the word
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered/office address in new registered agent and/or the new registered office/eddress:	Florida, enter the name of the
Name of New Registered Agent	
(Florida street add	ress)
New Registered Office Address:	, Florida
Ciry	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent; hereby accept the appointment as registered agent. I am familiar with and ———————————————————————————————————	
Signature of New Register	ea Agem, ij ch asojng
heck if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.	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 = ChiefExecutive 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	PT	John Doe	l
X Remove	<u>v</u>	Mike Jones	
XAdd	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	: Name	<u>Addres</u> s
()Change			
Remove			
2)Change			
Add			
Remove 3)Change			
Add			
Кеточе			
4)Change			
Add			
Remove			
5)Change		·	
Add			
Remove			
5)Change			<u> </u>
Add			
Remove			

Attach'additional sheets, i	ditional Articles, enter change(s) here: necessary). (Be specific)	
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	<u> </u>	-
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an amendment provide	s for an exchange, reclassification, or cance	ellation of issued shares,
provisions for implemen (if was applicable, ind	ing the amendment if not contained in the	amendment itself:
WA WAS	care ivis)	
<u> ivr</u>		
		<u> </u>

The date of each amendment(s) a	doption: , 6-15-2020	, if other than
date this document was signed.	6-15-2020	·
Effective date <u>if applicable</u> :	tno more than 90 days after amendment file a	ate)
Note: If the date inserted in this blo document's effective date on the D	ock does not meet the applicable statutory filing requirement epartment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without share	reholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the ufficient for approval.	amendment(s)
•	proved by the shareholders through voting groups. The followed each voting group entitled to vote separately on the amendate.	• •
"The number of votes cast by My+	for the amendment(s) was/were sufficient for approval	
	(voting group)	
Dated	15-2020	
selecte	director, president or other officer – if directors or officers h d, by an incorporator – if in the hands of a receiver, trustee, ted fiduciary by that fiduciary)	
Mux Phratily	MG+MUW (Q) () S (Typed or printed name of person signing)	5 Huntsborg
	President (Title of person signing)	
		•
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