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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Murray Laine Soli	utions Corporation	
DOCUMENT NUMBI	P18000090848		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
\	/anessa Jones Briscoe		<u> </u>
_		Name of Contact Person	
	Murray Laine Solutions Cor	poration	
-	<u> </u>	Firm/ Company	
	5111 South Ridgewood Ave	nue, Suite 2008	
-	<u> </u>	Address	
ŀ	Port Orange, FL 32127		
_	<u> </u>	City/ State and Zip Code	
vjbriso	:oe@gmail.com	16 - Carre annual magain	-atification)
	E-mail address: (to be us	sed for future annual report	notrication)
For further information	concerning this matter, pleas	se call:	
Vanessa Jones Briscoe		at (554-0530
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Murray Laine Solutions Corporation

(Name of Corporation as currently filed with the Florida Dept. of State) P18000090848 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 5111 South Ridgewood Avenue, Suite 2008 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Port Orange, FL 32127 C. Enter new mailing address, if applicable: 3331 Torre Blvd.. (Mailing address MAY BE A POST OFFICE BOX) New Smyrna Beach, FL 32168 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: ___ (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am 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 Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1) Change		_ _			
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					<u></u> .
Remove					
6) Change					
Add					
Remove					

	v). (Be specific)			
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an amendment provides for an erovisions for implementing the a	mendment if not co	eation, or cancella ontained in the am	endment itself:	. C5 ₁
rovisions for implementing the a	mendment if not co	eation, or cancella ontained in the am	endment itself:	
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The date of each amendment(s) adoption:	, if other than the
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 dat document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (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):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	r
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8/04/2020	
Signature Vanos Jone Brisare	
(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 fiduciary by that fiduciary)	
Vanessa Jones Briscoe	
(Typed or printed name of person signing)	
Owner/President	
(Title of person signing)	