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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Search Wizards, In	ic.	
DOCUMENT N	JMBER: P18000095539		
	cles of Amendment and fee are su	bmitted for filing.	
Please return all c	orrespondence concerning this ma	tter to the following:	
	Jacqueline M. Durham		
		Name of Contact Person	1
	Koontz & Associates, PL		
		Firm/ Company	
	1613 Fruitville Road		
		Address	
	Sarasota, FL 34236		
		City/ State and Zip Code	e
i	ackie@koontzassociates.com		
	-	sed for future annual report	notification)
	·	•	,
For further inform	ation concerning this matter, pleas	se call:	
Jacqueline Durha	m	at (225-2615
Na	me of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	e S43.75 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 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

Search Wizards, Inc.				
(Name	of Corporation as currently	filed with the Florida Dept. o	f State)	
P18000095539				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adop	its the following amen	dment(s) to
A. If amending name, enter the new na	ame of the corporation:			
			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ution "Corp," "Inc," or "C	Co". A professional corporation		
B. Enter new principal office address, (Principal office address MUST BE A S				_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			2019 1577 22 P	
D. If amending the registered agent an new registered agent and/or the new			of the	
Name of New Registered Agent	Miranda Hinshaw	_	· · · · · · · · · · · · · · · · · · ·	တ
	15 Paradise Plaza, #261			
	(Florida stre	et address)		
New Registered Office Address:	Sarasota	, F	lorida	
	((City)	(Zip Code)	
New Registered Agent's Signature, if continued the street of the appointment as registered agent and the street of	erédagent. I am familiar w		f the position.	
	→ Signature of New Reg	gistered 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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	Leslie O'Connor	5 Paradise Plaza, #261
Add		<u>;</u> -	Sarasota, FL 34236
X Remove		-	
2) Change	CEO	Miranda Hinshaw	5 Paradise Plaza, #261
X Add		<u> </u>	Sarasota, FL 34236
Remove		-	
3) Change			
Add		-	
Remove		-	
4) Change			
Add		-	
Remove		-	
5) Change	•		
Add		-	
Remove		-	
0 01			
6) Change			
Add		-	
Remove			

Attach additional sheets, if necessary).	(Be specific)
	
	
	
	
	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	
 	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) ac date this document was signed.	loption:, if	other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be partment of State's records.	e listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated // Signature		
(By a d	irector, president or other officer – if directors or officers have not been d, by an accorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Miranda Hinshaw	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	