P18000101654

| (Re | questor's Name) | |
|-------------------------|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | e) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: Amendment Sec Division of Corp | | • | * . |
|---------------------------------------|---|--|--|
| NAME OF CORPO | RATION: Allergy Maven, In | e. | |
| | BER: P18000101654 | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corre | spondence concerning this ma | itter to the following: | |
| | Robert O. Schwarz | | |
| | | Name of Contact Person | 1 |
| | Samole Law Firm, P.A. | | |
| | | Firm/ Company | |
| | 11270 SW 59 Avenue | | |
| | | Address | |
| | Miami, Florida 33156 | | |
| | | City/ State and Zip Code | e |
| | tricia@designheads.com | | |
| | - | sed for future annual report | notification) |
| For further information | on concerning this matter, plea | se call: | |
| Robert O. Schwarz | | at (305 | 670-5070 |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | or the following amount made | payable to the Florida Depa | irtment of State: |
| □ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Am- Div | iling Address endment Section ision of Corporations . Box 6327 | Amend Divisio | Address ment Section n of Corporations entre of Tallahassee |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

 \mathbf{of}

| Allergy Maven, Inc. | |
|--|-------------------------------|
| (Name of Corporation as currently filed with the Florida Dept. of | State) |
| P18000101654 | |
| (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts its Articles of Incorporation: | the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| Design Heads, Inc. | The new |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Inc.," or "Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name "chartered," "professional association," or the abbreviation "P.A." | ne abbreviation "Corp.," |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of new registered agent and/or the new registered office address: Name of New Registered Agent | f the |
| | |
| (Florida street address) | |
| New Registered Office Address:, Flo | rida |
| (City) | (Zip Code) |
| 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 t | he position. |
| Signature of New Registered Agent, if changing | |
| Check if applicable | |

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.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 = 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> Joh | n Doe | |
|----------------------------|-----------------------|-----------------|---------------------|
| X Remove | <u>V</u> <u>Mik</u> | <u>ce Jones</u> | |
| X Add | <u>SV</u> <u>Sall</u> | ly Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | P, S, D | Tricia Tie-Shue | 4866 SW 72nd Avenue |
| Add | | | Miami F1. 33156 |
| Remove | | | |
| 2) Change | P | Alexis Tie-Shue | 4866 SW 72nd Avenue |
| Add | | | Miami FL 33156 |
| X Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| Attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
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| f an amendment provides for an exching the amer | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | The state of the s |
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| The date of each amendment(s) date this document was signed. | adoption: | , if other than the |
|--|---|-------------------------------------|
| date ims document was signed. | | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| | (no more than 20 days after amenantin fite date) | |
| Note: If the date inserted in this document's effective date on the E | block does not meet the applicable statutory filing requirements, Department of State's records. | this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were action was not required. | lopted by the incorporators, or board of directors without sharehold | er action and shareholder |
| ■ The amendment(s) was/were ac by the shareholders was/were s | lopted by the shareholders. The number of votes cast for the amend sufficient for approval. | lment(s) |
| | oproved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s | |
| "The number of votes cas | t for the amendment(s) was/were sufficient for approval | |
| by | <u>,"</u> | |
| , <u></u> | (voting group) | |
| Dated/C | 1/13/20 CAM | |
| (By a select | director, president or other officer – if directors or officers have not ed, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary) | |
| | Tricia Tie-Shue | |
| | (Typed or printed name of person signing) | |
| | President & Secretary | |
| | (Title of person signing) | |