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A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: THE PERRONE O	RGANIZATION INC	
DOCUMENT NUM	BER: P19000008089		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	SANTINO PERRONE		
		Name of Contact Person	1
	THE PERRONE ORGANIZA	ATION	
		Firm/ Company	
	5550 GLADES RD STE 1060	6	
		Address	<u> </u>
	BOCA RATON FL 33431		
		City/ State and Zip Code	<u> </u>
	ceo@theperroneorganization.	.com	
	•	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
SANTINO PERROI	NE	at (204-1333
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
M	ailing Address		Address
Ar	nendment Section		ment Section
in:	vision of Commonstions	Divisio	n of Cornorations

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

THE PERRONE ORGANIZATION INC.

(Document Number of Corporation (if keep Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Consists Articles of Incorporation: A. If amending name, enter the new name of the corporation: **name must be distinguishable and contain the word "corporation." "company," or "incompany,"				
(Document Number of Corporation (if keep Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Continuation of Incorporation: A. If amending name, enter the new name of the corporation. "Inc." or Co.," or the designation "Corp." "Inc." or "Co". A professional co" "chartered," "professional association," or the abbreviation "P.A." 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) 5550 GLADES	·Fit bits - Caracian .			
Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Conts Articles of Incorporation: A. If amending name, enter the new name of the corporation: "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional co" chartered, ""professional association," or the abbreviation "P.A." 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)	<u>PETAR COESTATE</u>			
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name must be distinguishable and contain the word "corporation," "company," or "inc." or Co.," or the designation "Corp." "Inc." or "Co". A professional contract of the improfessional association," or the abbreviation "P.A." 3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS BOCA RATO C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	rporation adopts the following amendment(s			
Thc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional conclusion of the abbreviation "P.A." 3. Enter new principal office address, if applicable: **Principal office address MUST BE A STREET ADDRESS **BOCA RATO** C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) **5550 GLADES** 5550 GLADES**				
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Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) BOCA RATO 5550 GLADES	S RD STE 1066			
(Mailing address MAY BE A POST OFFICE BOX)	N FL 33431			
(Mailing address MAY BE A POST OFFICE BOX)				
(Mailing address MAY BE A POST OFFICE BOX)	S RIN STE INGG			
BOCA RATON	5550 GLADES RD STE 1066			
	BOCA RATON FL 33431			
 				
D. If amending the registered agent and/or registered office address in Florida, et	nter the name of the			
new registered agent and/or the new registered office address:				
Name of New Registered Agent				
(Florida street address)				
	ri i i			
New Registered Office Address:(City)	, Florida (Zip Code)			
,,	(11)			
New Registered Agent's Signature, if changing Registered Agent:				
hereby accept the appointment as registered agent. I am familiar with and accept th	e obligations of the position.			
Signature of New Registered Agent, i	f changing			
Check if applicable				

 \Box The amendment(s) is/are being tiled 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>	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) X Change	PCEO	SANTINO PERRONE	1440 W TAYLOR ST STE 705
Add			CHICAGO IL 60607
Remove			
2) Change	<u>V</u>	MICHAEL PERRONE	3705 N CENTRAL PARK AVE
X Add			CHICAGO IL 60618
Remove 3) Change	CFO	PHILLIP PERRONE	7339 VIA LURIA
X Add			LAKE WORTH FL 33467
Remove			
4) Change	S	CHRISTINE MILLER	1440 W TAYLOR ST STE 705
X Add	-		CHICAGO IL 60607
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if neo	cessary). (Be spec	iific)	<u>r</u>		
			 · 		
				. –	
					
·	-		-		
					
in amendment provides fo	r an exchange, recl	assification, or	cancellation of	issued shares,	
rovisions for implementing (if not applicable, indicat	the amendment if	not contained in	n the amendme	ent itself:	
(y mor uppredict, mateur	(1471)				
					
					·

JANUARY 1, 2021

) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : _		
	(no more than 90 days after amendment file o	late)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing required Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sha	archolder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The foll for each voting group entitled to vote separately on the amend	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
MARCI Dated	111, 2021	
Signature	D/	
sele	a director, president or other officer – if directors or officers heted, by an incorporator – if in the hands of a receiver, trustee, pinted fiduciary by that fiduciary)	
	SANTINO PERRONE	
	(Typed or printed name of person signing)	
	PRESIDENT AND CEO	
	(Title of person signing)	·