P190000 10625

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SUI GENERIS	ENTERPRISE GROUP CO	ORP.		
DOCUMENT NUM	IBER: P19000010625				
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	MYON TURNER				
		Name of Contact Perso	n		
	SUI GENERIS ENTERPRIS	E GROUP CORP.			
	Firm/ Company				
	1944 49TH ST S SUITE 111	, ,			
		Address			
	GULFPORT, FLORIDA 337	707			
		City/ State and Zip Cod	e		
	suigenerisenterprisegroup@g	gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:at (981-3674		
Name	of Contact Person	at (Area Co)		
	or the following amount made p		·		
□ \$35 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)		
Am Div P.C	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301		

ALCKETY, A GESTATE

Articles of Amendment

to

Articles of Incorporation

of

	iris Enter		-ax	10.
(<u>Name o</u>	f Corporation as currently	filed with the Florida Dept. of State)		
N/V PIGOCOC	250010			
	(Document Number of 0	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, this \emph{F}	lorida Profit Corporation adopts the following	ng amen	dment(:
A. If amending name, enter the new na	me of the corporation:			
N/A			The	new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	" "company," or "incorporated" or the coon. A professional corporation name must P.A."	abbrevia contain	tion the
B. Enter new principal office address,	if applicable:	N/A		
(Principal office address MUST BE A S			•	_
				— ,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	19	<u> </u>
			- 	
				⊖ ∵
D. If amending the registered agent an	d/or registered office addr	ess in Florida, enter the name of the	∴	ا جائز جن مان جن
new registered agent and/or the new	w registered office address:		 	
Name of New Registered Agent	MYON TURNER			- 05.5
<u>James, revisagne sa isa</u>	620 MARION HILL LANE	<u> </u>	_	
	(Florida stre	et address)	-	
No. 1 December 11 (1970 and A. I. Institute	RUSKIN	. Florida	0	
New Registered Office Address:			Code)	_
New Registered Agent's Signature, if c	hanging Registered Agent:	ith and accept the obligations of the position.		
Thereby accept the appointment as regist	erea agem. 1 am jumatar w	un and accept the obligations of the positions	•	
M				
	you for	egistered Agent, if changing	_	
	Signature of New Re	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, 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:

 $P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each <math>o_j$ 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. Ther 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 Char Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Р	MYON TURNER	620 MARION HILL LANE
X Add			RUSKIN, FLORIDA 33570
Remove			
2) Change	CEO	DANIEL TURNER	620 MARION HILL LANE
Add			RUSKIN, FLORIDA 33570
Remove			
3) Change			
Add			
Remove			<u> </u>
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		-	· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A

	option:	, if other tha
date this document was signed. N/A		
Effective date <u>if applicable</u> :		1.
	(no more than 90 days after amendment file date,	1
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirement partment of State's records.	s, this date will not be listed a
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the ame ficient for approval.	endment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen	
"The number of votes east for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	oted by the board of directors without shareholder action and s	hareholder
The amendment(s) was/were adoption was not required.	oted by the incorporators without shareholder action and sharel	nolder
FEB 25, 2 Dated	2019	
Dated		
Signature	/ you /	
selected	ector, president or other officer – if directors or officers have a by an incorporator – if in the hands of a receiver, trustee, or old fiduciary by that fiduciary)	
;	MYON TURNER	
-	(Typed or printed name of person signing)	·
ı	PRESIDENT	
-	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·