## P190000 13433

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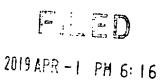
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**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: AMAZINGCHOIC	CES.COM INC		
DOCUMENT NUME	P19000013433			<del></del>
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	TOBY COHAN			
		Name of Contact Perso	n	
		Firm/ Company		
	9161 FAIRBANKS LANE U	INIT 3		
		Address	<u> </u>	
	BOCA RATON, FL 33496			
	·	City/ State and Zip Cod	le	
MAR	.C1040@AOL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	_
For further information	n concerning this matter, pleas	se call:		(9547099800
TOBY COHAN		954 at (	752-3889	(954.709.980
Name o	of Contact Person		ode & Daytime Telephone	Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
\$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)	
	ling Address endment Section		Address Iment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



AMAZINGCHOICES.COM INC

(Name of Corporation as current	ly filed with the Florida Dept. of State) - 1 11 C	
	10-4-1 (2E, F)	
19000013433	·	
(Document Number of	of Corporation (if known)	
tursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen	
. If amending name, enter the new name of the corporation:		
	The new	
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
Enter new principal office address, if applicable:	9161 FAIRBANKS LANE UNIT 3	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	BOCA RATON, FL 33496	
	· · · · · ·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9161 FAIRBANKS LANE UNIT 3	
	9161 FAIRBANKS LANE UNIT 3 BOCA RATON, FL 33496	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	BOCA RATON, FL 33496	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	BOCA RATON, FL 33496  Iress in Florida, enter the name of the	
(Mailing address MAY BE A POST OFFICE BOX)  1. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	BOCA RATON, FL 33496  Iress in Florida, enter the name of the	
(Mailing address MAY BE A POST OFFICE BOX)  1. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	BOCA RATON, FL 33496  Iress in Florida, enter the name of the s:	
(Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent	BOCA RATON, FL 33496  Iress in Florida, enter the name of the s:	
(Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent	BOCA RATON, FL 33496  Iress in Florida, enter the name of the 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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Joi	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		·
Add				
Remove				
2) Change		_		
Add				
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)
	<del></del> -
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(у погаррисавіе, іпаісаїе N/A)	
(у погаррисаоне, таксане N/A)	
(у погаррисаоне, таксане N/A)	
(у погаррисаоне, таксане N/A)	
(у погаррисаоне, таксане N/A)	
(у погаррисаоне, таксане N/A)	
(у пот аррисаоне, такане мл.)	

	03/28/201	9		
The date of each amendment(s) date this document was signed.	adoption:			, if other than the
	3/28/2019			
Effective date <u>if applicable</u> :	(no m	ore than 90 days	after amendment file date)	
Note: If the date inserted in this document's effective date on the			atutory filing requirements	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK C</u>	<u>ONE</u> )		
■ The amendment(s) was/were a by the shareholders was/were			er of votes cast for the ame	ndment(s)
☐ The amendment(s) was/were a must be separately provided f				
"The number of votes ca	ist for the amendment(	s) was/were suffic	cient for approval	
by			."	
,	(voting gro	ир)		
<ul><li>☐ The amendment(s) was/were a action was not required.</li><li>☐ The amendment(s) was/were a</li></ul>				
action was not required.				
03-28-20 Dated Signature	100 m	Cha		
(By a selec		or – if in the hands	directors or officers have read a receiver, trustee, or o	
	TOBY COHAN			
	(Typed)	or printed name o	f person signing)	_
	PRESIDENT	7	la Cole -	
		(Title of person	on digning)	