P1900014125

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06/24/19++01028++604 **85.0





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Sole Vertice, INC. DOCUMENT NUMBER: 4219000, 141The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: L'potein Name of Contact Person Soleventure, Inc Avenue NE Address bure FL 33 City/State and Zip Code to be used for future annual report notification)

For further information concerning this matter, please call:

File to at (202_)[DN - 150 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 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)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Articles of Amenument to

Articles of	f Incorporation	
	of	P)
Sale Nontrole Inc.		
(Name of Corporation as curr	ently filed with the Florida Dept. of State)	The The
PIGDODDI4125		
	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the fo	llowing amending
A. If amending name, enter the new name of the corporation	<u>n</u>	
NIA		The
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	or "Co". A professional corporation name	the abbreviatio must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	Sout Petersbu	South
	33701	2
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
	· ·	
D. <u>If amending the registered agent and/or registered office</u> new registered agent and/or the new registered office ado	address in Florida, enter the name of the fress:	
Name of New Registered Agent N/A		
(Florid	da street address)	
New Registered Office Address:	, Florida	
ivew Regimered Office Address.	(City)	(Zip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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 - Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of eached. 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. 1 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 C Mike Jones. V as Remove, and Sally Smith, SV as an Add. Example:

X_Change	<u>PT</u> <u>Johr</u>	<u>1 Doe</u>	
<u>X</u> Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>v Smith</u>	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove	(00°,V	Bobyn Rusignuala	740 4th Street North #168 St. Petersburg Fr
2) <u>X</u> Change <u>Add</u> <u>Remove</u>	CEO,P	Eve Epstein	740 4the Street North #168 St Petershus Fr
3) Change Add Remove			
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) 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)

1 11C Otto ou coce e date this document was signed.

Effective date if applicable:

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

L The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)

- The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated [2] 19 Signature Len 2 9000

(By a director, president br other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

EVE E Epetern (Typed or printed name of person signing)

CEC) (Title of person signing)