P190000 16491

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Amend

JAN 0 8 2020 ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Add A Lens			
DOCUMENT NUMI	D1000001C101			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Allen Jacobi			
		Name of Contact Person	1	
	The Law Office of Allen Jaco			
	THE LAW OTHER BY AHER SAC			
		Firm/ Company		
	11077 Biscayne Blvd, Suite	200		
		Address		
	Miami FL, 33161			
		City/ State and Zip Cod		
		•		
Allen	@allenjacobilaw.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Allen Jacobi		at (305	893-5644 de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & 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)	
Mai	lling Address	Street	Address	
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle			ixecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Add A Lens, INC

	Corporation as curren	tly filed with the Florida Dept. of Stat	<u>te</u>)
P19000016491			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	006, Florida Statutes, thi	s Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name	me of the corporation:		
N/A			The new
name must be distinguishable and contu "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associati	tion "Corp," "Inc," or	"Co". A professional corporation na	
3. Enter new principal office address, i	f applicable:	N/A	,
Principal office address MUST BE A ST			20 20
	· · · · · · · · · · · · · · · · · · ·		ZOISINOVIZ SECRE INC ALLI AHAS
			SS 26
Enter new mailing address, if applic (Mailing address MAY BE A POST O		N/A	m.
(mauing aguress MAT BE A POST O	TTICE BUX		<u> </u>
			م المان
			8 2
		dress in Florida, enter the name of the	•
). If amending the registered agent and			-
D. If amending the registered agent and new registered agent and/or the new	registered office addre		
new registered agent and/or the new	registered office addre		·····
new registered agent and/or the new	registered office addre		
new registered agent and/or the new Name of New Registered Agent	registered office addre	SS :	

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	PI	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	James W Comstock	7044 Keighley Street
X Add			San Diego, CA 92120
Remove			
2) Change	VP	John Redfearn	431 Winged Foot Drive
X Add			McDonough, GA 30253
Remove			_ _
3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•	dditional sheets, if necessary). (Be specific)
/A	
<u></u>	
	·
-	
if an am	endment provides for an exchange, reclassification, or cancellation of issued shares,
provision	ons for implementing the amendment if not contained in the amendment itself:
- -	not applicable, indicate N/A)
A	

	N/A	در در مر
The date of each amendment(s)	adoption:	, if other than th
date this document was signed.		
Effective date if applicable:	//A	
Ellective date il applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date. Department of State's records.	ite will not be listed as th
Adaption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	5)
☐ The amendment(s) was/were a must be separately provided	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
·/	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehold	ет
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
	nan /	
11/20/20 Dated /		
Signature /	an From	
(By	a director, president or other officer - if directors or officers have not been	
	cted, by an incorporator - if in the hands of a receiver, trustee, or other cou	
арр	pinted fiduciary by that fiduciary)	
	SHANI BURTON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	