P190000 48467

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SECTION SECTIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: NICHE AUTO	FINDERS INC.	
DOCUMENT NUME	ER: P19000048467		
The enclosed Articles	of Amendment and fee are su	sbmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Processing Department		
		Name of Contact Person	n
		Firm/ Company	
	5605 Riggins Court	Suite 200	
		Address	
	Reno, NV 89502		
	· —	City/ State and Zip Cod	e
	@incauthority.com E-mail address: (to be use concerning this matter, please	sed for future annual report	notification)
Processing Departm	ent	at (800	, 638-2320
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	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)
Ame Divis P.O.	ing Address ndment Section tion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation of

NICHE AUTO FINDERS INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P190000	48467		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607,1006. Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the fo	ollowing amend	ment(s)
A. If amending name, enter the new name of the corporation:			
		The n	ew
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	To". A professional corporation name		
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)	3120 Summer House Dr		
(Maining dualess MAT DE AT OST OTTICE BOX)	Valrico, FL 33594		-
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		- 7 - 7	-
D. If amending the registered agent and/or registered office addr.		ہے اور	_
new registered agent and/or the new registered office address:		- 元 i= (3)	· ; ;
Name of New Registered Agent		<u> </u>	1
)))))))))))))))))))	.11
tFlorida stre	et address)		
New Registered Office Address:	. Florida		
(City)		(Zip Code)	_
New Registered Office Address:		Zip Code)	-
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the po	sition.	
Signature of New Re	rgistered Agent, if changing		

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) Change	Р	Aaron Bleich	3120 Summer House Dr
Add			Valrico, FL 33594
Remove			
2) Change			
Add			
Remove			
3) Change	<u> </u>	_	
Add			19
Remove			19 JUL 3
4) Change			
Add			3 9 0
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

E. It amending or adding additional Articles, enter change(s) here:			
(Attach additional sheets, if necessary). (Be specific)			
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	;· - ;	بشد. حداد	(J
provisions for implementing the amendment if not contained in the amendment itself:	무용	က္	
(if not applicable, indicate N/A)		æ3 ∵	
	7.		
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The date of each amendment(s) ad date this document was signed.	nption: 06/05/2019	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suf	nted by the shareholders. The number of votes east for the amen ficient for approval.	dment(s)
	oved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and sha	ireholder
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareho	lder
Dated	7/24/19	
selected	rector, president or other officer—if directers or officers have no by an incorporator—if in the hands of a receiver, trustee, or other diffuciary by that fiduciary)	
	Aaron Bleich	
-	(Typed or printed name of person signing)	
	President	
-	rTitle of person signing)	
		FILED 19 JUL 30 AH 9 ATT STATE OF ATT