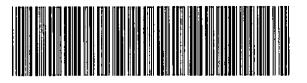
P19000054721

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Enigma Developer	s Corporation	
	BER: P19000054721		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Ray Combs		
		Name of Contact Persor	1
	Enigma Developers Corporat	ion	
		Firm/ Company	
	2598 East Sunrise Blvd, Suite		
		Address	
	Fort Lauderdale, FL 33304		
		City/ State and Zip Code	e
	raycombs@raycombs.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Ray Combs		954	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	edling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

ENIGMA DEVELOPERS CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State) P19000054721

(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corporati	ion:
	The new
name must be distinguishable and contain the word "corporation"." or Co.," or the designation "Corp." "Inc." or "Corporation" chartered, "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Corp" Co". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable:	2598 East Sunrise Blvd, Suite 2009
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Fort Lauderdale, FL 33304
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1201 N. Federal Highway, #4385
	Fort Lauderdale, FL 33338
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office as	
Name of New Registered Agent	
	orida street address)
New Registered Office Address:	, Florida
HEW REQUIETED Office Hudress.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	
Signature of	New Registered Agent, if changing
	V G V G U

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.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)

Example:

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.

X_Change	<u>PT</u>	John Do	<u>ee</u>	
X Remove	<u>V</u>	Mike Jos	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	VP	_	Guernande Combs	1201 N. Federal Hwy, #4385
Add X Remove				Fort Lauderdale, FL 33338
2) Change	_	_		
Add Remove 3) Change		_		
Add Remove				
4) Change Add		_		
Remove				
5) Change Add		_		
Remove 6) Change	 	_		
Add				

	(Be specific)
	
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	<u> </u>
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
9-01-2020	
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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder a action was not required.	ction and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendme by the shareholders was/were sufficient for approval.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by 6	
(voting group)	
9-1-2020	
Dated	
Signature	
(By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	
David Ray Combs	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	