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ľO:	Amendment Section
	Division of Corporations

NAME OF CORPORATION: NOW PROPESSIONAL SERVICES, INC.
DOCUMENT NUMBER: P19000073653
he enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Brittani Lasenby Name of Contact Person
NUOVE PROFESSIONAL SERVICES, INC.
P.O. BOX 1146
St Augustine, 7L 32085 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Beittani Lastenby at 313, 687-6087 Name of Contact Person Area Code & Daytime Telephone Number
inclosed is a check for the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status

(Additional copy is

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment

to

Articles of Incorporation

of

Noble	= Pro Jessiam	1 Servico	512	nc
(Name of Corporation as curren				_
	<u>- 99,000</u>	13653		
(Document Number	of Corporation (if known)	· •		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi ts Articles of Incorporation:	s Florida Profit Corporation a	dopts the followi	ng ame	ndment(s)
A. If amending name, enter the new name of the corporation:				
NA			Tha	new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corpor	orated" or the a ation name must	abbrevi	ation
B. Enter new principal office address, if applicable:	NA		20	
Principal office address <u>MUST BE A STREET ADDRESS</u>)		<u> </u>	5	
		7		
			25	·····
C. Enter new mailing address, if applicable:	. 310	; ;	F 9	
(Mailing address MAY BE A POST OFFICE BOX)	$\frac{\mathcal{Q}_{I}}{\mathcal{Q}_{I}}$	<u>:</u>	_ ``` _	
		r-,	17	
				-
If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address.		ne of the		_
Name of New Registered Agent 1-1-				
			_	
(Florida s	treet address)		_	
New Registered Office Address: VI-A		mada.		
New Registered Office Address.	(City)	. Florida <u>. </u>	Code)	
Sam Decistored Amentle Company of the series Decision of American				
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	<u>11:</u> · with and accept the obligation	s of the position.		
		,		
	-		_	
Signature of New	Registered 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> <u>Jc</u>	ohn Doe		
X Remove	<u>V</u> <u>M</u>	like Jones		
X Add	<u>SV</u> S:	ally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) X Change	030	Brittani	Losenla	1 83 Huntiano CIR
Add			_	1 83 HUNTIANOUR St. AUCUSTINE, 76 32084
Remove				32084
2) X Change	P	Shacory	Paulk	83 HUNHAND CIF.
Add		J		83 Huntiano Cir. 5+ Augustine, 74
Remove	\/	Theodis F	Da Wa	32084
3) Change Add		Tricalis I	QUIPI	83 HUNTIANO CIR 54 AUGUSTINE, AL
Remove				32084
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	al sheets, if necessa	ry). (Be specific)			
MA					
					
					
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an amendme	nt provides for an	exchange, reclassifi	cation, or cancella	ation of issued sha	res.
rovisions for (if not app	implementing the licable, indicate N/.	amendment if not c	ontained in the an	nendment itself:	
AK		-,			
7 +1			,		
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Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	d by the shareholders. The number of votes east for the amendment(s) ient for approval.
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):
"The number of votes cast for t	the amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder
☑ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder
Dated 11/2	1/2019
Signature Bu	etani Lasentel
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)
P	oritani Lasenby
	(Typed or printed name of person signing)
	280
(Titl	le of person signing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

document's effective date on the Department of State's records.