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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: Simply Comfort E	state Inc.		
DOCUMENT NUMBER	P10000073723	·		
The enclosed Articles of A	mendment and fee are st	ibmitted for filing.		
Please return all correspon	dence concerning this ma	atter to the following:		
Eug	gene Savitskiy			
		Name of Contact Perso	n .	
		Firm/ Company		
105-19 Barberry Place				
		Address		
Tor	onto, Ontario M2K 3E3,	Canada		
	***	City/ State and Zip Cod	e	
info@sim	plycomfortestate.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information con	ncerning this matter, pleas	se call:		
Eugene Savitskiy		at (<u>416</u>	250-0202	
Rugene Savitskiy at (416) 250-0202 Name of Contact Person Area Code & Daytime Telephone N		de & Daytime Telephone Number		
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	AS43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Division P.O. Box	ent Section of Corporations	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Simply Comfort Estate Inc.		
(Name of Corporatio	on as currently filed with the Florida Dept. of S	tate)
P19000073723		
(Docum	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new name of the cor	rporation:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the c	" "Inc," or "Co". A professional corporation	I" or the abbreviation
B. Enter new principal office address, if applicable:	<u> </u>	·- <u>-</u>
(Principal office address MUST BE A STREET ADD		
		
		<u> </u>
		1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	X)	وسيس
(Maning Basicon State Marie 1995) VII 1997	<u></u>	2
		5 5
D. If amending the registered agent and/or register		<u>the</u>
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Flor	rida (Zip Code)
	(CIĻ)	izip code)
New Registered Agent's Signature, if changing Regi	istored Agent	
I hereby accept the appointment as registered agent.		he position.
Signa	ature 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: <u>X</u> Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Eugene Savitsky	105-19 Barberry Place
Add			Toronto, Ontario M2K 3E3
x Remove			Canada
2) Change	P	Eugene Savitskiy	105-19 Barberry Place
<u>x</u> Add			Toronto, Ontario M2K 3E3
Remove			Canada
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			7 5g
5) Change		_	<u> </u>
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Artic Attach <i>additional sheets, if necessary</i>).	(Be specific)		
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If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:		58
(if not applicable, indicate N/A)	nument it not contained in the amendment resert.	jë ë	
			
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	ption:		, if o	ther than the
date this document was signed.				
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)			
	ini more inan 90 aays after amenameni jae aate)			
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this cartment of State's records.	date wili	not be	listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendmen icient for approval.	t(s)		
	oved by the shareholders through voting groups. The following states ach voting group entitled to vote separately on the amendment(s):	nent		
	or the amendment(s) was/were sufficient for approval			
by	(voting group)			
	(voting group)			
☐ The amendment(s) was/were adopaction was not required.	ted by the board of directors without shareholder action and sharehol	der E	19 NOY	
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder	• • • • • • • • • • • • • • • • • • • •	<u>ဂ</u> ၂	Ti D
10/28/2019				5
Dated Signature	6.1		7:58	
(By a dir selected.	ector, president or other officer – if directors or officers have not bee by an incorporator – if in the hands of a receiver, trustee, or other co d fiduciary by that fiduciary)			
ı	Eugene Savitskiy			
-	(Typed or printed name of person signing)			
1	President			
-	(Title of person signing)			