P19000079607

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FILED

1023 OCT 30 AH 10: 42

A. BUTLER NOV-7 2023

COVER LETTER

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TO: Amendment Section Division of Corporations

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NAME OF CORPOR	ATION: IDPLIZZ, INC.					
DOCUMENT NUMB	D10000070607					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	Mare Duthoit					
•	Name of Contact Person					
	IDPLIZZ, INC.					
•		Firm/ Company				
	12555 Orange Drive, Ste 417	76				
-		Address				
	Davie, Florida 33330					
-		City/ State and Zip Cod	e			
	mduthoit@resiliant.com					
-	E-mail address: (to be u	sed for future annual report	notification)			
For further information Marc Duthoit	concerning this matter, plea	954	328-5068			
Name o	f Contact Person	at (Area Co) de & Daytime Telephone Number			
Enclosed is a check for	the following amount made		•			
S35 Filing Fee	S43.75 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

IDPLIZZ, INC.	FILED
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P19000079607	ly filed with the Florida Dept. of State) 2023 OCT 30 Alf 10: 42
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
RESILIANT, INC.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or 'Co", "chartered," "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	12555 Orange Drive
(Principal office address MUST BE A STREET ADDRESS)	Suite 4176
	Davie, Florida 33330
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	(same as principal address)
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	<u>s:</u>
Name of New Registered Agent N/A	
(Florida su	reet address)
N/A New_Registered Office Address:	P1. /1.
New Registered Office Address.	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>:</u>
Signature of New R	Registered Agent, if changing

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>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				_
2) Change		_	· 	
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		<u> </u>
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. <u>If ame</u> Attach)	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
N/A	
	
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-	
. <u>II an a</u> provi	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself:
(į	f not applicable, indicate N/A)
N/A	

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	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the flicient for approval.	ne amendment(s)
	roved by the shareholders through voting groups. The job each voting group entitled to vote separately on the amen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voting group)	
2 1 10 3	77 7 27	
Datedvo	23 - 2023	
Signature	m	
By a di	rector, president or other officer - if directors or officers l	have not been
selected	f, by an incorporator - if in the hands of a receiver, trustee	e, or other court
appoint	ed fiduciary by that fiduciary)	
	Victoria Cerrone (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	CLO/CGO (Title of person signing)	
	(Title of person signing)	

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