Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000088235 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CAPITOL SERVICES, INC.

Account Number: 120160000017 Phone : (855) 498-5500 Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN PAYNUITY CORP.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Articles of Amendment to Articles of Incorporation οſ

PAYNUITY CORP.					
(Name o	of Corporation as currently	filed with the Florida De	ot, of State)		
P19000081312					
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation	adopts the fo	llowing ame	ndment(s) t
A. If amending name, enter the new m	ame of the corporation:				
Paynuity Corporation				The	new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A			reviation "Co	ур., "
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:	N/A	<u></u>		
					
C. Enter new mailing address, if appl (Malling address MAY BE A POST		N/A			_
· · · · · · · · · · · · · · · · · · ·				- 	-
				<u> </u>	020
D. If amending the registered agent an	d/or registered office addr	ess in Florida, enter the na	me of the	HASS	MAR
new registered agent and/or the new	w registered office address:		_	TARY ASSE	9
Name of New Registered Agent	N/A			<u> </u>	D
					AH 10:
	(Florida stre	es address)		<u></u>	<u>ن</u> 2
New Registered Office Address:	N/A		5 1 • 1 -	55	CER CER
New Registerea Office Address.		City)	_, Florida	(Zip Code)	
New Registered Agent's Signature, if c			6.1		
I hereby accept the appointment as regist	iered agent. I am jamiliar w	ith and accept the obligation	ns of the pos	tition.	
	Signature of New Re	gistered Agent, if changing			
	#101-miles of 1101, 110	O G Y 4-1001-54-6			

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	PT	John Doc		
X Remove	<u>y</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	2020 MAR SECRETALL AHA
i) Change		_		
Add				R 19 AM
Remove				
2) Change				AM 10: 28 DE STAFE LELORIDZ
Add				
Remove 3) Change				
Add				
Remove			<u> </u>	
4) Change		_		
Add				
Remove				
5) Change		_		<u> </u>
Add				
Remove				,
6) Change		_		·
Add				
Remove				

rticle IV (Authorized Shares) is hereby deleted in its entirety and the following shall be substituted in lie	u thereof:
ARTICLE IV	
The number of shares the corporation is authorized to issue is: 200,000,000 shares of Common Stock, \$.0	0001 par
alue per share	
	· · ·
	SECRET FALLAH
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	ARY 6 SSEE
provisions for implementing the amendment if not contained in the amendment itself:	19 AM BO SSEELFLO
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	19 AM 10: 26 ARY OF STATI SSEE, FLORID
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	ARY OF STA
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	19 AM 10: 26 ARY OF STATI SSEE, FLORID
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	19 AM 10: 26 ARY OF STATI SSEE, FLORID
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	19 AM 10: 26 ARY OF STATI SSEE, FLORID

••••
F
11-

The date of each amendment(s) ad	March 13, 2020	, if other than the
date this document was signed.		
Effective date if applicable:	n filing with the Florida Secretary of State	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bidocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and	shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	T 2
"The number of votes cast	for the amendment(s) was/were sufficient for approval	2020 HAR SEGRETALLAHA
by	(voting group)	AR 19
Dated_3/17	7-2020	AMIO:
Signature	Pon H. Mosey): 2 9
sclected	rector, president or other officer – if directors or officers have not been i, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Ron Moses	
	(Typed or printed name of person signing)	
	as authorized person of Moses Maguire LLC	
	(Title of person signing)	