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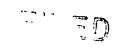
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COVER LETTER . .

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: YOU SAVE TOD	AY INC	
DOCUMENT NUMBER	R: ARTICLES OF INCO	RPORATION	
	Amendment and fee are su		
Please return all correspo	ndence concerning this ma	tter to the following:	
C.	ARY ROSEN		
_		Name of Contact Persor	1
		Firm/ Company	
14	790 BONAIRE BLVD A	PT 102	
Address DELRAY BEACH, FL 33446			
		City/ State and Zip Code	
JFONT(CPA@OPTONLINE.NET		
	E-mail address: (to be us	sed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call:	
CARY ROSEN		at (214-3167
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for th	ne following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio P.O. Bo	g Address ment Section n of Corporations ox 6327 ssee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section on of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of



YOU SAVE TODAY INC

2019 DEC 13 A	i¥II: ∩s
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(<u>Name</u>	of Corporation as current	ly filed with the Florida Dept. of State)
	(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:	
U - SAVE TODAY INC	•	The new
	Corp," "Inc," or "Co"	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:	N/A
(Trincipal typice address <u>50001 jii 21 0</u>	TROCT ROOKLOS	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A
D. If amending the registered agent an new registered agent and/or the new News of New Projects and Amendian		
Name of New Registered Agent		
	(Florido et	reet address)
	N/A	reel tuuress)
New Registered Office Address:		, Florida (City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		t: with and accept the obligations of the position.
	Signature of New F	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>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X_ Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change		N/A		
Add				
Remove				
2) Change				
Add			·	
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				
		Page 2 of 4		
E. If amending or additional she	ng additi ets. if ned	onal Articles, enter change(s) here: vessary). (Be specific)		

(Attach additional sheets, if necessary).	(Be specific)	
N/A		

	· · · · · · · · · · · · · · · · · · ·
	
F. 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: (if not applicable, indicate N/A) N/A	
	
	
Page 3 of 4	
12/02/2019	
The date of each amendment(s) adoption:	, if other than th
12/03/2019	
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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suf		The number of votes cast for the amendment(s)
		s through voting groups. The following statement d to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was	s/were sufficient for approval
by		,""
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	nted by the board of direc	ctors without shareholder action and shareholder
The amendment(s) was/were adopaction was not required.	sted by the incorporators	without shareholder action and shareholder
Dated	fiolia ry Roser	
Signature (XX)	zy Roer	
(By a dir selected.	ect of , president or other	officer – if directors or officers have not been in the hands of a receiver, trustee, or other court
(CARY ROSEN	
_	(Typed or prin	nted name of person signing)
<u>-</u>	President	_
C	Title of person signing)	