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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : GFS TAX & ACCOUNTING SERVICES

Account Number : 120140000089
Phone : (754)301-2128
Fax Number : (954)252-4650

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

Email Address: INFO@GFSTAXACCT. COM

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COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION: BY LEDE	RMAN CORP					
DOCUMENT NUMBER: P19000092433						
The enclosed Articles of Amendment and	ee are submitted for filing.					
Please return all correspondence concerning	g this matter to the following:					
JULIANA MACHA	DO, CPA					
	Name of Contact Person					
GFS TAX & ACCC	UNTING SERVICES					
	Firm/ Company					
2001 W CYPRESS	CREEK RD STE 102B					
	Address					
FORT LAUDERDA	LE, FL 3309					
	City/ State and Zip Code					
INFO@GFSTAXA	CCT.COM					
E-mail address	(to be used for future annual report notification)					
For further information concerning this matter, please call:						
JULIANA MACHADO, CPA	at (754) 301-2128 Area Code & Daytime Telephone Number					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee \$43.75 Filing Certificate of						
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					

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Articles of Amendment to Articles of Incorporation H200001980963

BY LEDERMAN CORP	
	ly filed with the Florida Dept. of State)
19000092432	
(Document Number o	f Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation adopts the following amendment
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation," " Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
. Enter new principal office address, if applicable:	2600 Glades Circle, Suite 1000
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Weston, FL, 33327
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2600 Glades Circle, Suite 1000
(maining washess manager) a see see a see Heart	Weston, FL., 33327
If amending the registered agent and/or registered office add new registered agent and/or the new registered office address.	lress in Florida, enter the name of the
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	Florida
TOWN TAXABLE CONTRACTOR OF THE PARTY OF THE	(City) (Zip Code)
lew Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	ti
nercoy accept the appointment as registered agent. I am jamittar	min and accept the congulation of the position.

H200001980963

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	P		LEDERMAN, FABIOLA	6509 Botaniko Dr North
Add		-		Weston, FL, 33326
X Remove				
2) Change		_	 .	
Add				
Remove Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

H200001980963

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	·
f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

4200001980963

The date of each amendment(s) a date this document was signed.	doption:	, if other then the
Effective date if applicable:		
Enecute date in applicable:	no more than 90 days after amendment file dote)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date wepartment of State's records	all not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action a	nd shureholder
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes east for the invendment(s) ifficient for approval.	
The amendment(s) was/were upp must be separately provided for	proved by the shareholders through voting groups. The following statement each woting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voling group)	
Doted	1. 2020 ALO CALLE OF MANUAL rector, president or other officer - if directors or officers have not been all by an incorporator - if in the hands of a receiver, trustee, or other court	
	led fiduciary by that fiduciary)	
	LEDERMAN, FABIOLA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	