P200000 27611

(Requestor's	Name)
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PICK-UP W	/AIT MAIL
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Omend/ name change

COVER LETTER

TO: Amendment Sec Division of Corp		·	ŕ	
NAME OF CORPO	RATION: ANTIVIRUS DEA	LS INC.		
DOCUMENT NUM	D200000027711			
	s of Amendment and fee are su	busitted for filing		
		•		
Please fetum an com	espondence concerning this ma	ther to the following.		
	Gidon Levy			
		Name of Contact Person	1	
	<u> </u>	Firm/ Company		
	2637 E Atlantic Blvd #35997	• •		
		Address		
	Pompano Beach, FL 33062			
		City/ State and Zip Cod	e	
	gidon@activechase.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, plea	se call:		
gidon levy		at (9698715	29 ** %
Name	of Contact Person	Area Co	de & Daytime Telephone Number	- , ,
Enclosed is a check f	for the following amount made	payable to the Florida Depa	artment of State:	; ,
■ \$35 Filing Fee	☐S43.75 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)	11.11.15. 1.15. 1.15.
An Div	ailing Address nendment Section vision of Corporations D. Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ANTIVIRUS DEALS INC.			
(Name	of Corporation as currently	filed with the Florida Dept. of State)	
P20000027611			
	(Document Number of	Corporation (if known)	-
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this F	Torida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
CLICKORP INC.			The new
	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation professional corporation name must contain	on "Corp"
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
D. If amending the registered agent at new registered agent and/or the ne		ss in Florida, enter the name of the	<u> </u>
	Dor Levy		•
Name of New Registered Agent	•		- <u>272</u>
	19370 collins ave apt ph H		
	(Florida street address)		٠٠. ني - ر
New Registered Office Address:	sunny isles beach	. Florida 33160 (Zip) (Zip)	Code)
		iy) izip (cxiej
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	tered agent. I am familiar w.	ith and accept the obligations of the position. Graph of the position of the position of the position. Graph of the position of the position of the position.	-
Check if applicable			

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

Example:

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	V	LEVY, Dor	19370 collins ave apt ph11
x Add			sunny isles beach, FL 33160
Remove			
2) Change			
Add			
Remove 3) Remove			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	·
, S			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:

date this document was	idment(s) adoption:, if other the
Effective date if applie	able:
	(No more than 20 days after amenament file date)
	ted in this block does not meet the applicable statutory filing requirements, this date will not be listed and on the Department of State's records.
Adoption of Amendm	ent(s) (<u>CHECK ONE</u>)
■ The amendment(s) vaction was not requi	vas/were adopted by the incorporators, or board of directors without shareholder action and shareholder red.
	vas/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
	was/were approved by the shareholders through voting groups. The following statement provided for each voting group entitled to vote separately on the amendment(s):
	of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
D.	4/7/2020
Date	
Sion	ature
J.g.	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	gidon levy
	gidon levy (Typed or printed name of person signing)

(Title of person signing)

Attached-is-a-form-for-filing-Articles-of-Amendment-to-amend-the-articles-of-incorporation-of-a-Florida-Profit-Corporation-pur-6.png