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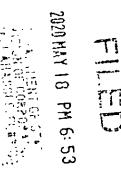
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JUN 0 8 2020 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Pluto Select Co	orp	
DOCUMENT NUMBER:	P20000032821		
The enclosed Articles of Amenda	nent and fee are su	bmitted for filing.	
Please return all correspondence (concerning this ma	tter to the following:	
,	C W Nickelson		
		Name of Contact Perso	n
	Pluto Select Corp		
		Firm/ Company	
1	398 S. Hillcrest A		
		Address	
C	Clearwater, FL	33756	
		City/ State and Zip Cod	e
	1nicky1029@gma	ail.com	
E-mai	l address: (to be us	sed for future annual report	notification)
For further information concernin	g this matter, pleas	se call:	599 4887
Name of Contact I	Person) de & Daytime Telephone Number
Enclosed is a check for the follow			
_	.75 Filing Fee & ificate 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 Addre Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Pluto Select Corp

(Name	of Corporation as currently	filed with the Florida Dep	t. of State)	
P200000	32821			
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation a	dopts the following a	amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,	Corp." "Inc," or "Co". A			
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 as new registered agent and/or the ne			me of the	
Name of New Registered Agent	Christopher Nickelson			
	1398 So. Hillcrest Ave.			
	(Florida stre	ret address)		
New Registered Office Address:	Clearwater FL		33756 _, Florida_	
		City)	(Zip Coe	de)
	$\bigcap A$		4~ **;	2020
New Registered Agent's Signature, if	Acidos			
Thereby accept the appointment as regis	ifred degrift fain familiar si	ith and accept the obligation	ns of the position.	18 PH
Charle if an aliquble	Signature of New Re	gistered Agent, if changing	88 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	6: 2 [†]
Check if applicable The amendment(s) is/are being filed p	nursuant to e 607 0120 / E13 /	e) FS		
is the amendment(s) is/are being fried p	oursuant to 5, 007,0120 (11) (C). 1		

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 Doe	
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	CEO	Peggy O Nickelson	1398 S. Hillcrest Ave
Add			Clearwater, FL 33756
Remove 2) Change	CEO	Christopher Nickelson	1398 So. Hillcrest AVE.
X Add			Clearwater, FL 33756
Remove 3) Change			
Add			
Remove			
4) Change			-
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	****		
Add			
Remove			

	if necessary). ((Be specific)			

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The date of each amendment(s) add	option:	, 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 blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, the artment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendmicient for approval.	nent(s)
	oved by the shareholders through voting groups. The following states are the shareholders through voting group entitled to vote separately on the amendment(s):	ntement
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
Peggy O Nickelson		
ту	(voting group)	
	Clyped of printed name of person signing)	
	CED	
_	(Title of person signing)	