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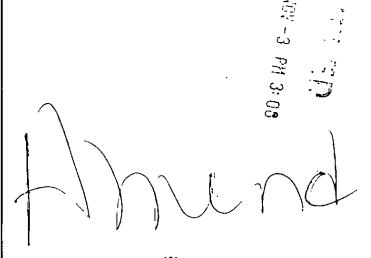
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: INDEPENDENT N	NATIONAL CONVENTIO	N CORPORATION
DOCUMENT NUM	P20000051212		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	itter to the following:	
	Joseph L. Jones-EL		
		Name of Contact Persor	1
	INDEPENDENT NATIONA	L CONVENTION CORPO	RATION
		Firm/ Company	
	1228 E. 7TH AVE STE. 200		
		Address	
	TAMPA, FL 33605		
		City/ State and Zip Code	e
	api11248@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	tion concerning this matter, pleas		
Joseph Jones-EL		at ()
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment Articles of Incorporation of

INDEPENDENT NATIONAL	CONVENTION	CORPORATION
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(Name of Corporation as currently filed with the Florida Dept. of State)		
P20000051212		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ring amendmer	nt(s) to
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevio "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must con- "chartered," "professional association," or the abbreviation "P.A."	tion "Corp.," tain the word	
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	202	
	1.04	- 1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1	ر س دس
(1714)11178 4441-1535 1977-1505-1577-1505-1577-1505-1577-1577-1577-	$\overline{\omega}$	-
		
	<u> </u>	الشمعا
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	. 0	
Name of New Registered Agent		
(Florida street address)	<u> </u>	
New Registered Office Address:, Florida,		
(City) (Z.	ip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	n.	
Signature of New Registered Agent, if changing	_	
Cheek if applicable		

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
l) Change	P	_	ROBERT LEE BEAN	1228 E 7TH AVE STE. 200
X Add				TAMPA, FL 33605
Remove				
2) Change		_		
Add				
Remove 3) Change	<u>. </u>	_		
Adđ				<u> </u>
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				

	ts, if necessary). (I	s, enter change(s) he Be specific)			
			 _		
					
	 ,				
					
					
					
		 			
		 			
					
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		ge, reclassification, (or cancellation of issu	ed shares,	
an amendment prov	vides for an exchan _i		d in the amendment i	tself:	
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	October 31, 2021	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Nove Effective date <u>if applicable</u> :	mber 1, 2021	
Effective date in applicable:	(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, this date partment of State's records.	will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	pted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	for the amendment(s) was/were sufficient for approval	
by	."	
·,	(voting group)	
October 31,	2021	
Dated		
Signature		
(By a dir	rector, president or other officer - if directors or officers have not been	
	by an incorporator - of in the hands of a receiver, trustee, or other court	
appointe	ed fiduciary by that fiduciary)	
į	Joseph L. Jones-EL	
-	(Typed or printed name of person signing)	
•	CEO	
-	(Title of person signing)	