P20000057972

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: Immigos, Inc.		
	1BER: P20000057972		
	es of Amendment and fee are su	ibmitted for filing.	
Please return all corr	respondence concerning this ma	atter to the following:	
	Alexander Wiker		
		Name of Contact Persor	1
	Immigos		
	-	Firm/ Company	
	3930 S. Nova Rd., Ste 306		
		Address	
	Port Orange, FL 32127		
		City/ State and Zip Code	2
	alex@immigos.com		
	- ·	sed for future annual report	notification)
For further informati Alexander Wiker	on concerning this matter, plea	se call: at (888-0882
Name	of Contact Person		/ de & Daytime Telephone Number
Enclosed is a check l	for the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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			<u>Address</u>
			ment Section
			n of Corporations entre of Tallahassee
	J. Box 6327 Hahassee, FL 32314		I. Monroe Street, Suite 810
14	11411433661113	=71J;	TO THE PROPERTY OF THE PARTY

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Immigos, Inc.				
(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)		
P20000057972			~. ~?	
· 	(Document Number)	of Corporation (if known)	70	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	. Florida Profit Corporation adopts the follo	owing amending	
A. If amending name, enter the new n	ame of the corporation:		(
Immigos, P.A.			The new	
	"orp," "Inc," or "Co".	"company," or "incorporated" or the abbrev A professional corporation name must co "	viation "Corp.,"	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		3930 S. Nova Rd., Ste. 306		
		Port Orange, FL 32127		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3930 S. Nova Rd., Stc. 306		
		Port Orange, FL 32127		
D. If amending the registered agent ar new registered agent and/or the ne				
Name of New Registered Agent	Alexander Wiker			
	3930 S. Nova Rd., Ste. 30	06		
	(Florida st	reet address)		
New Registered Office Address:	Port Orange	, Florida	27	
		· · · · · · · · · · · · · · · · · · ·	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agen tered agent - Lam familiar	<u>t:</u> with and accept the obligations of the positi	ton.	
	1	The state of the s		
	<i>f</i> /			

Signature of New Registered Agent, if changing

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)

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	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s
i) Change			<u></u>	
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				·
Remove				
4) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

(Attac	ending or adding additional Articles, enter change(s) here: h additional sheets, if necessary). (Be specific)	
Purpose	to provide immigration legal services	
-		
		
		_
		
prov	amendment provides for an exchange, reclassification, or cancellation of issued shares, isions for implementing the amendment if not contained in the amendment itself:	
۱ ۱/A	if not applicable, indicate N/A)	
N/ / X		

	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	tno more than 90 days after amendment file date)	
	(no more than 90) days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the sharcholders. The number of votes cast for the amen sufficient for approval.	dment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendments.	
"The number of votes co	st for the amendment(s) was/were sufficient for approval	
by	``	
	(voting group)	
11/16/20 Dated Signature	21	
setec	director, president or other officer - if directors or officers have no ted, by an incorporator - if in the hands of a receiver, trustee, or oth inted fiduciary by that fiduciary)	
	Alexander Wiker	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	