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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: VANTAGE FINA	NCIAL SOLUTIONS, INC	<u> </u>
DOCUMENT NUM	BER: P20000065173		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	KIARA ROBINSON		
	Name of Contact Person		
	Firm' Company		
	1743 NW 56TH AVE		
	LAUDERHILL, FL 33313	Address	
	City/ State and Zip Code		
	KIARA.ROBINSON@YAHOO.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
KIARA ROBINSON		at (786	238-9553
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O.	ting Address endment Section sion of Corporations Box 6327 phassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee 1. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

VANTAGE FINANCIAL SOLUTIONS, INC.

(v filed with the Florida Dept. of State)	
200000065173		
(Document Number o	f Corporation (if known)	
arsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following	ng amendment(s)
. If amending name, enter the new name of the corporation:		
LACKPRINT FINANCIAL GROUP, INC		_The new
ame must be distinguishable and contain the word "corporation," "e lnc.," or Co.," or the designation "Corp," "Inc," or "Co" chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must conta	_ он "Corp.,"
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	N/A	
		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	1021 (18)1 13
		P
		2:
If amending the registered agent and/or registered office addi- new registered agent and/or the new registered office address		29
Name of New Registered Agent N/A		
(Florida str	eet address)	_
New Registered Office Address:	, Florida	
	(City) (Zip	Codei

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.

Example: X Change	PT	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>	<u>Addres</u> s
1) X Change	PTD	KIARA ROBINSON	1743 NW 56TH AVE
Add			LAUDERHILL, FL 33313
Remove			
2) Change	<u>V</u>	КНАМІЧА ВАРТІЅТЕ	1743 NW 56TH AVE
XAdd			LAUDERHILL, FL 33313
Remove 3) Change	V	EMARI BAPTISTE	1743 NW 56TH AVE
X Add	,		LAUDERHILL, FL 33313
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

е. <u>п</u> (А	f amending or adding additional Articles, en Attach additional sheets, if necessary). (Be sp	necific)
N/A		
	-	
	<u> </u>	
	-	
		-
	·	
		
F. <u>II:</u>	f an amendment provides for an exchange, r	eclassification, or cancellation of issued shares,
Di	provisions for implementing the amendment (if not applicable, indicate N/A)	t if not contained in the amendment itself:
N/A	·	
	· · · · · · · · · · · · · · · · · · ·	
		

The date of each amendmen		, if other than the
date this document was signed	i. - 01/07/2021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	·)
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirement he Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required	re adopted by the incorporators, or board of directors without shareh	older action and shareholder
	re adopted by the shareholders. The number of votes cast for the an ere sufficient for approval.	nendment(s)
	re approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes	s east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
01/06 Dated	/2021	
SC	y a director, president or other officer – if directors or officers have elected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
	KIARA ROBINSON	
	(Typed or printed name of person signing)	
	PRESIDENT, TREASURER, & DIRECTOR	
	(Title of person signing)	