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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Epic Deals Miami	Inc	
DOCUMENT NU	MBER: P20000081782		
	cles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	Heidi Padilla		
	· - ·	Name of Contact Person	1
	Epic Deals Miami Inc		
		Firm/ Company	
	801 NW 116th Ave		
		Address	
	Plantation, Fl. 33325		
		City/ State and Zip Code	e
	Heidi@epicdealsmiami.com		
	.	sed for future annual report	notification)
For further inform Rinaldo Cruz	ation concerning this matter, plea		216-7545 de & Daytime Telephone Number
Na	me of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	e □\$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 Tallahassee, Ft. 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Epic Deals Inc			
(Name	of Corporation as current	v filed with the Florida Dept. of State)	
P20000081782			
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following	ng amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
			The new
	Corp," "Inc," or "Co" :	company," or "incorporated" or the abbreviati 1 professional corporation name must contain	
B. Enter new principal office address, if applicable:		10392 W STATE RD 84	
(Principal office address MUST BE A S		SUITE 109	
		DAVIE. FL. 33324	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10392 W STATE RD 84	
		SUITE 109	
		DAVIE, FL. 33324	
D. If amending the registered agent an new registered agent and/or the ne			
Name of New Registered Agent	Rinaldo Cruz		
	801 NW 116th Ave		_
	(Florida str	reet address)	_
New Registered Office Address:	Plantation	, Florida 33325	
Hen Registered Office Address.		(City) (Zip	2021 AFR 30
New Registered Agent's Signature, if c I hereby accept the appointment as regist		<u>:</u> with and accept the obligations of the position.	30
	17		
	155	-	FH 10: 40
	Signature of New R	egistered Agent, if changing -	10

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PTD	Rinaldo Cruz	10392 W State Rd 84
X Add			Suite 109
Remove			Davie, Fl. 33324
2) X Change	CEO	Heidi Padilla	10392 W State Rd 84
_ Add			Suite 109
Remove 3) Change			Davie, Fl. 33324
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change		<u> </u>	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ARTICLE IV SHOULD HAVE A TOTAL OF 500 SHARES FOR THE CORPORATION.

<u> </u>
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) THE TOTAL NUMBER OF SHARES FOR THE CORPORATION SHOULD BE 500.
THE SHARES ARE EQUALLY DIVIDED AS FOLLOWS;
250 SHARES OWNED BY RINALDO CRUZ (PTD), 250 SHARES OWNED BY HEIDI PADILLA (CEO)
N. 21

	02/14/2021	
The date of each amendment(s late this document was signed.) adoption:, if other	r than the
•	2/14/2021	
Effective date <u>if applicable</u> :		-
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be list Department of State's records.	ed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholde	er
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
Heidi Padilla Rina	ıldo Cruz	
by	(voting group)	
selec	director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) Heidi Padilla Angleto Angleto	2
	(Typed or printed name of person signing)	
	Chief Executive Officer	
	(Title of person signing)	
	(The or person argumes)	
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