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Division of Corporations

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From:

46636

Account Name : ACCOUNTING2EASY CORP

Account Number : I20150000067 Phone : (786)487-1398 Fax Number : (305)503-9351

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COR AMND/RESTATE/CORRECT OR O/D RESIGN THE FINIX GROUP, INC.

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1-305-503-9351



December 9, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

THE FINIX GROUP, INC. 854 KILLARNEY LANE AUBURNDALE, FL 33823

SUBJECT: THE FINIX GROUP, INC. REF: P20000085763

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

As of January 1, 2020, the form for amending a Profit Corporation has changed. Please use the new Profit Articles of Amendment form located on our website (www.sunbiz.org).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050

Terri J Schroeder Regulatory Specialist III FAX Aud. #: H20000418735 Letter Number: 720A00024653 2020-12-14 16:57:22 GMT

1-305-503-9351

From: Accounting2Easy Corp

H20000418735

Articles of Amendment to Articles of Incorporation of

| THE FINIX GROUP, INC. | |
|---|---|
| (Name of Corporation as curre | ntly filed with the Florida Dept. of State) |
| P20000085763 | |
| (Document Number | r of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation: | nis Florida Profit Corporation adopts the following amendment(s) to |
| A. Hamending name, enter the new name of the corporation: | |
| N/A | Th. |
| name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A. | A professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | N/A |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A |
| D. If amending the registered agent and/or registered office ad | ddress in Florida, enter the name of the |
| new registered agent and/or the new registered office addre | |
| Name of New Registered Agent N/A | 5 |
| | |
| (Florida : | street address) |
| New Registered Office Address: N/A | , Florida |
| | (Cuy) (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiai | nt: r with and accept the obligations of the position. |
| Signature of Now | Registered Agent, if changing |
| | rogorce rigem, if counging |
| Check if applicable ☐ The amendment(s) is/are being filed pursuant to s, 607.0120 (11) |)(e) FS |

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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 | <u>PT</u> | John Doe | |
|----------------------------|--------------------------|------------------------|------------------|
| X Remove | $\underline{\mathbf{v}}$ | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | S | MARIA MERCEDES ALVAREZ | 4759 SW 7 STREET |
| XX Add | | - | MIAMI, FL 33134 |
| Remove | | | |
| 2) Change | | _ | |
| Add | | | |
| Remove 3) Remove | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | · |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

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1-305-503-9351

From: Accounting2Easy Corp

| 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) | E. If amending or adding additional Arti- (Attach additional sheets, if necessary). | (Be specific) | |
|---|--|--|-------|
| 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) | | (,,) | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | |
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| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | |
| (if not applicable, indicate N/A) | F. If an amendment provides for an exch provisions for implementing the ange | nange, reclassification, or cancellation of issued shares, | |
| N/A | (if not applicable, indicate N/A) | moment in the amendment user. | |
| | N/A | | |
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To: 18506176380

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1-305-503-9351

From: Accounting2Easy Corp

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| | N/A | |
|---|---|--|
| The date of each amendment(s) adop | tion: | , if other than the |
| date this document was signed. | | |
| Effective date <u>if applicable</u> : N/A | | |
| | (no more than 90 days after | amendment file date) |
| Note: If the date inserted in this bloc document's effective date on the Depar | c does not meet the applicable statute tment of State's records. | ory filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ■ The amendment(s) was/were adopte action was not required. | d by the incorporators, or board of dir | ectors without shareholder action and shareholder |
| ☐ The amendment(s) was/were adopte by the shareholders was/were suffic | d by the shareholders. The number of ient for approval. | votes cast for the amendment(s) |
| ☐ The amendment(s) was/were approving must be separately provided for each | ed by the shareholders through voting h voting group entitled to vote separa | groups. The following statement tely on the amendment(s): |
| "The number of votes east for | the amendment(s) was/were sufficien | t for approval |
| by | | |
| | (voting group) | |
| 124112020 Dated | *************************************** | |
| Signature Ana 7 | Ma Bermudez | |
| (by a directed b | or, president or other officer - if direct on incorporator - if in the hands of a | ctors or officers have not been |
| | iduciary by that fiduciary) | receiver, trustee, or other coun |
| | A M BERMUDEZ | |
| _ | (Typed or printed name of per | son signing) |
| PR | ESIDENT | |
| _ | (Title of person signing) | |