Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220000033893)))



HZ20000033893ABC.

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To:

From:

Division of Corporations

Fax Number

: (850)617-6380

Account Name : GILMAN CIOCIA INC.

Account Number : I20120000051 Phone

Fax Number

: (305)937-7773 : (815)301-2897

nter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

COR AMND/RESTATE/CORRECT OR O/D RESIGN SMART SLEEP SOLUTIONS INC.

| <u>- 110110 (11C.</u> |
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JAN 05 2021

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to tion

| | | to |
|--------------------|------------|---------------------------------|
| | | Articles of Incorporat |
| SMART SLEEP SOLUTI | ONS INC. | of |
| P20000088707 | (Name of C | orporation as currently filed w |

| P20000088707 | |
|--|---------------------|
| P20000088707 (Name of Corporation as currently filed with the Florida Dept. of St | ute) |
| Oncument Name | |
| (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the | |
| A To | e following amendme |
| A. If amending name, enter the new name of the corporation: | |
| | |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab" "Inc.," or Co.," or the designation "Corp.," "Inc." or "Co". A professional corporation many "chartered," "professional association," or the obb. | |
| Inc.," or Co., " or the designation "Corp." "Inc." or "Company," or "incorporated" or the of | The new |
| "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must chartered," "professional association," or the abbreviation "P.A." | T contain #450 |
| D. Enter new principal access to | 23014 |
| (Principal office address MUST BE A STREET ADDRESS) | ن ت |
| A STREET ADDRESS | <u></u> |
| | - - |
| | |
| C. Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE BOX) | Ö |
| —————————————————————————————————————— | , |
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| | |
| | |
| If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address: | |
| new registered agent and/or the new registered office address in Florida, enter the name of the | |
| Name of Name | |
| I I I I I I I I I I I I I I I I I I I | |
| | |
| (Florida street address) | |
| New Registered Office Address: | _ |
| Floris | |
| 10/10/7 | Tip Code) |
| 1 | ogr C vaky |
| v Registered Agent's Signature, if changing Registered Agent: | |
| reby accept the appointment as registered agent. I am familiar with and accept the obligations of the positive | |
| gione cu agent. I am familiar with and accept the obligations of the position | n |
| 2 ···· Framo | ··· |
| | |
| | |
| Signature of New Registered Agent, if changing | |
| k 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 (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,

| X Change | PT | John D. | , · w |
|-------------------------------|--------------------------|----------------|----------------------|
| X Remove | | John Doc | |
| | $\underline{\mathbf{y}}$ | Mike Jones | |
| _X Add | <u>SV</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Address</u> |
| 1) Change | <u>P</u> | HAIMZON, MORAN | 1360 NW 65TH AVE |
| A d d x | | | STE A |
| Remove | P | MCD com. | PLANTATION, FL 33313 |
| 2) Change | - | KERTERMAN, NIR | 1360 NW 65TH AVE |
| | | | STE A |
| Remove Change | VP | KERTERMAN, NIR | PLANTATION, FL 33313 |
| X Add | | | 1360 NW 65TH AVE |
| Remove | | | STE A |
| 4) Change | | | PLANTATION, FL 33313 |
| Add | | | 1 |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |

| (Ottach = d2 · · | rucies, enter change(s) have |
|--|--|
| E. If amending or adding additional As (Attach additional sheets, if necessary) | (Be specific) |
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| 4. American 1 | • |
| an amendment provides for an exchang | le reclassification or an annual |
| (if not condinate the amendm | re, reclassification, or cancellation of issued shares, pent if not contained in the amendment itself: |
| o not applicable, indicate N/A) | and a programment) is elf: |
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| and the was signed. | if other than the |
|--|--------------------------|
| Effective date if applicable: | |
| (no more than 90 days after amendment file date) | |
| Note: If the date incorrect in this kind is | |
| document's effective date on the Department of State's records. | will not be listed as th |
| CHECK ONE) | |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required. | |
| action was not required. | and shareholder |
| The amendment(s) was/were adopted by the all the second se | |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | N 3 1- |
| The amendment(s) washings and | 1022 1022 |
| The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote senarately on the senarately of the senarately on the senarately on the senarately on the senar | J A |
| | 2 22 |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | ₽ 385 |
| | ♣ ^{정도는} |
| (voting group) | AM 10: |
| > Dated 11 9 /20) | 17 |
| × Signature | |
| (By a director president | |
| (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| appointed fiduciary by that fiduciary) | 1 |
| X_NIR KFN TF K | MAI |
| (Typed or printed name of person signing); | |
| PRES | |
| | |