P21000054362

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: My 360 Inc.		
DOCUMENT NUM	D21000051362		
The enclosed Article.	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	Robert Shouppe		
		Name of Contact Person	1
		Firm/ Company	
	9120 Double Diamond Parkw	ay	
	-	Address	· · · · · · · · · · · · · · · · · · ·
	Reno, Nevada 89521		
		City/ State and Zip Code	2
	rshouppe@laughlinusa.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas		648-0966
, ,	of Contact Person		de & Daytime Telephone Number
	or the following amount made p		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address mendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 Y	Address ment Section in of Corporations entre of Tallahassee V. Monroe Street, Suite 810 issee, FL 32303

Articles of Amendment to Articles of Incorporation of

My 360 Inc.			
(Name	of Corporation as curren	tly filed with the Florida Dept, of State)	
P21000054362			
-	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following	amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
	Corp, " "Inc," or "Co".	"company," or "incorporated" or the abbreviation A professional corporation name must contain	"Corp.,"
B. Enter new principal office address,		1100 Brickell Bay DriveApt 76M	
(Principal office address MUST BE A S		Miami FL 33131	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		P.O. Box 1971	
		S1. George, UT 84790	
D. If amending the registered agent an new registered agent and/or the ne			
Name of New Registered Agent			
	N/A	treet address)	
	N/A	N/A	
New Registered Office Address;		(City) , Florida (Zip Co	
		(,	,
New Registered Agent's Signature, if c I hereby accept the appointment as regis		it: with and accept the obligations of the position.	21 Jul 19
	Signature of New .	Registered Agent, if changing	
Charles Consultant In	•		2.
Check if applicable ☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11) (e), F.S.	Ç ş,

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)

Example:

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>	<u>John De</u>	<u>ne</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Ju	<u>mes</u>	
X Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	D	_	Gaydon Leavitt	225 South University Ave
Add				Office #177
X Remove				St. George, UT 84770
2) Change	D		Devin Johnson	1100 Brickell Bay DriveApt 76M
X Add		_		Miami FL 33131
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				1911
Remove				

	idditional sheets, if nec	zssary). – (Be specifi	rc)			
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<u>If an an</u>	endment provides for	an exchange, reclas	sification, or can	cellation of issued	shares,	
provisi	ons for implementing	the amendment if n	ot contained in th	<u>e amendment itse</u>	<u>lf:</u>	
	not applicable, indicate	N/A)				
Α						
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			···	··· · - · · · · · · · · · · · · · · · ·		
· - · · · · · · · · · · · · · · · · · · 						
						

13th of July, 2021
The date of each amendment(s) adoption:, if other the
date this document was signed.
N/A
Effective date <u>if applicable</u> :
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
■ 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.
☐ 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 separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
13th of July, 2021 Dated
Signature Justine Beard
(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)
Justine Beard
(Typed or printed name of person signing)
Secretary

(Title of person signing)