P220000 47523

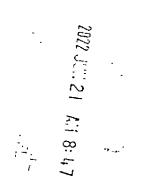
(Red	questor's Name)	
(Add	dress)	· · · · · · · · · · · · · · · · · · ·
(Add	dress)	
(City	//State/Zip/Phone	e #)
	,	·
PICK-UP	■ WAIT	MAIL
_		
	siness Entity Nar	
(Du:	siness Entity ivar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to f	iling Officer:	

Office Use Only



600389430926

10.21 30-00-20-011 -475.59



Ch 8/25/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 2020 MARKETING INC.						
DOCUMENT NUMBER:						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
PAULA M. SACCOMANNO Name of Contact Person JOLO MARKEFING, THE. Firm/ Company 5395 Grand Park Place Address BOCA PAFON, FLORIDA 33486 City/ State and Zip Code LXCLUSIVE MARKEFING COMPANNAT GMAIL. COM E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
PAULA M. SACCOMANNO at 561, 716-6806						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee						

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation

	of		1
2010 n	MARKETING, INC		2022 JUL 21 14 8:
(Name of Corporatio	n as currently filed with the	Florida Dept. of Stat	<u>e</u>)
P220008^	17523		•
	ent Number of Corporation (i	f known)	
arsuant to the provisions of section 607.1006. Florida Articles of Incorporation:	Statutes, this Florida Profit (Corporation adopts the	following amendment(s) t
If amending name, enter the new name of the cor	rporation:		
ame must be distinguishable and contain the word "cor Inc.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbrey	or "Co". A professional a	ncorporated" or the ab corporation name mus	The new breviation "Corp.," st contain the word
Enter new principal office address, if applicable:			
rincipal office address <u>MUST BE A STREET ADDI</u>	RESS)		
			
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	<u></u> _		
		· · · · · ·	
If amending the registered agent and/or registere	d office address in Florida,	enter the name of the	
new registered agent and/or the new registered of	ffice address:		
Name of New Registered Agent	-		
			
	(Florida street address)		
New Registered Office Address:		121 a al . d a	
	(City)	, Florida_	(Zip Code)
w Registered Agent's Signature, if changing Registered	tered Agent:		
ereby accept the appointment as registered agent. To	am Jamiliar with and accept t	he obligations of the po	osition.

Signature of New Registered Agent, if changing

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 Joh	<u>n Doe</u>	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sali</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Z	Paula M. Saccomanno	5395 GrAND PARLPURCE
<u>√</u> Add			BOCA RATON, FLORIDA
Remove			33486
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Parama			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)		
	·		
			
			·
			
			
			-
			
	-		
			<u>.</u>
an amandment around a farmer to	1. 15		
an amendment provides for an excha rovisions for implementing the amen (if not applicable, indicate N/A)	dment if not contained in t	ncellation of issued sha the amendment itself:	res,
(if not applicable, indicate N/A)			
	-		
			
		-	
	<u>_</u>	<u>-</u>	

•	
The date of each amendment(s) ac date this document was signed.	doption:, if other than the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONF)
The amendment(s) was/were adopted action was not required.	nted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendment(s) ficient for approval.
☐ The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	or the amendment(s) was/were sufficient for approval
by	,
	(voting group)
Dated	AUA M. Saccimal D retor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)
	PAULA M. SACCOMANNO
_	(Typed or printed name of person signing)
	P. I. A