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COVER LETTER

TO: Amendment Section Division of Corporations

. . . .

NAME OF CORPORATION: K & O BENEFIT CONSULTANTS INC.

DOCUMENT NUMBER: P23000010606

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anthony M. Ward, Esq., General Counsel

 Name of Contact Person
 K & O Benefit Consultants Inc.
 Image: Consultants Inc.

 Firm/ Company
 1373 Veterans Hwy Ste 10
 Image: Consultants Inc.

 Address
 Address

 Haupauge NY H1788
 City/ State and Zip Code

 tward@ccg1800.com
 Image: Consultants Inc.

 E-mail address: (to be used for future annual report notification)
 Image: Consultants Inc.

For further information concerning this matter, please call:

 Tony Ward
 at (631
 249-0500 x6246

 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

S43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy ((Additional Copy_ (is enclosed))

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

K & O BENEFIT CONSULTANTS INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P23000010606

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A		The	C.new E
name must be distinguishable and contain the word "corporat "Inc.," or Co.," or the designation "Corp," "Inc," or " "chartered," "professional association," or the abbreviation	Co". A professional corpo		mord R
B. Enter new principal office address, if applicable:	N/A		22 III
(Principal office address <u>MUST BE A STREET ADDRESS</u>])		
			PH 2: 35
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A		m
			_
D. If amending the registered agent and/or registered off	ion addrors in Florida, onto	- the name of the	
new registered agent and/or the new registered office :		r the name of the	
Name of New Registered Agent			
	lorida street address)		
New Registered Office Address:		. Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered	<u>i Agent:</u>		
I hereby accept the appointment as registered agent. I am fa		bligations of the position.	

Signature of New Registered Agent, if changing

Check if applicable

□ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 Chapee

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<u>X</u> Change	<u>11</u>	John Doe	
X Remove	<u>V</u>	<u>Mike Jones</u>	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change	Pres	Louis Russo	36 Windward Isle
Add			Palm Beach Gardens FL 33478
X Remove			
2) Change			11. 24 PH 2: 35
Add			
3) Remove			FILE
Add			
Remove			· <u> </u>
4) Change			
Add			
Remove			
5) Change	<u></u>	<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

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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)	A	
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	provisions for implementing the amendment if not contained in the amendment itself:	
	(if not applicable, indicate N/A)	
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2023 APR 24 PH 2: 35

The date of each amendment(s) adoption	N/A	, if other than the
date this document was signed.		
N/A Effective date if applicable:		
	(no more than 90 days after amendment file date)	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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

ру <u>—</u>	(voting group)		2023	
	04/19/2023 Dated Signature (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) Anthony M. Ward, Esq.	CRETARY OF STATE	13 APR 24 PH 2: 35	
	(Typed or printed name of person signing)		_	
	General Counsel			

(Title of person signing)