## P23000082180

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## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: FINECO	GLOBAL INC			
	ER: <u>723000</u>				
The enclosed Articles of	f Amendment and fee are sub	mitted for filing.			
Please return all corresp	ondence concerning this matt	er to the following:			
SARANSH SHARMA					
•		Name of Contact Person			
	SFT	GROUP INC			
-		Firm/ Company			
_	700 5.205	EMARY AVE Address	STE 204		
_					
_	WEST PAILM	BEACH , FC City/ State and Zip Code	-33401		
		City/ State and Zip Code	;		
into a styroup ai					
•	E-mail address: (to be us	ed for future annual report	notification)		
For further information	concerning this matter, pleas	e call:			
SARANSH	SHARMA	at(G17	de & Daytime Telephone Number		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$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)		
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassec, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation FINELD GLOBAL INC (Name of Corporation as currently filed with the Florida Dept. of State) P23000082180 (Document Number of Corporation (if known) $\sim$ 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: SHUFFLE INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 700 S. ROSEMARY B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) WEST PARM BEACH, C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: SARANSH SHARMA Name of New Registered Agent STE 204 WEST PARM BEACH New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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) (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 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 = ChiefExecutive 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	<u>John I</u>	<u> </u>	
X Remove	<u>V</u>	Mike.	<u>Jones</u>	
X Add	<u>sv</u>	Sally S	<u>Smith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) 💢 Change	?		SHARIMA, SARAMSH	7.00 S. ROSEMARY AVE
Add				STE 204
Remove				WEST PALMBEACH, FL-33401
2) Change	VAR	1 VP	SHIV DASANI, ARPANA	700 S. ROSEMARY AVE
/ <u></u> Add				STE DOY
Remove 3) Change	C	<del>-</del>	SFT GROUP INC	NEST PARM BEACH, FL-33401 700 S RUSEMARY AVE
Add				STE 204
Remove				WEST PALM BEACH, FL -33401
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	-	<del>_</del>		
Add				
Remove				

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f an amendment provides for a provisions for implementing the	he amendment if no	t contained in the ar	incincular reserve	
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The date of each amendment(s) adoption	n: 06/08/2024	, if other than the
date this document was signed.		
	06/08/2024	
Effective date <u>if applicable</u> :	() し (c タ / 202 Y (no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department	oes not meet the applicable statutory filing requirements, tent of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted b action was not required.	y the incorporators, or board of directors without sharehold	er action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficien	by the shareholders. The number of votes east for the amend at for approval.	iment(s)
☐ The amendment(s) was/were approved must be separately provided for each t	by the shareholders through voting groups. The following swoting group entitled to vote separately on the amendment(s	<i>J</i>
"The number of votes cast for the	e amendment(s) was/were sufficient for approval	2024 JUN 13 PM 5:2
by	(voting group)	1.685
Dated C6	08/2024	5: 21 CCA-7
Signature	full	4.5
(By a director	r, president or other officer – if directors or officers have no an incorporator – if in the hands of a receiver, trustec, or oth	i been er court
appointed fid	luciary by that fiduciary)	
	SARANSH SHARMA	
<del></del>	(Typed or printed name of person signing)	
	PRESIDENT.	
<del></del>	(Title of person signing)	