724 000020978

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PICK-UP WAIT MAIL
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24/17/24

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: DISCOVERLIFEV	VAVEANFO, INC.			
DOCUMENT NUM	BER: P24000020978				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Dominick Leonardi				
		Name of Contact Person	n		
	DISCOVERLIFEWAVE.INFO. INC				
		Firm/ Company			
	2749 Abney Ave				
	4	Address			
	Orlando, FL 32833				
		City/ State and Zip Cod	e		
	dominick.leonardi@proton.m	ie	İ		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	407	484-7611		
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made		· 1		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Arr Div P.C	iling Address endment Section ision of Corporations Box 6327 lahassee, FL 32314	Ameno Divisio The C 2415	Address Innent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

DISCOVERLIFEWAVE.INFO, INC

			
(<u>Name</u>	of Corporation as currentl	<u>y filed with the Florida Dept.</u>	of State)
P24000020978			
	(Document Number o	f Corporation (if known)	i i
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation add	
A. If amending name, enter the new n	ame of the corporation:		
DISCOVERLW.INFO, INC	and of the corporation.		+
name must be distinguishable and contain	adaman I tanan anadam ti ta		The new
"Inc" or Co.," or the designation "Chartered," "professional association,"	Corp," "Inc," or "Co" 2		
B. Enter new principal office address,	if applicable:		
(Principal office address MUST BE A S	TREET ADDRESS)	N/A	
C. Enter new mailing address, if appl			
(Mailing address MAY BE A POST	OFFICE BOX)		11
		N/A	
D. If amending the registered agent an			<u>e df the</u>
new registered agent and/or the ne	w registered office address	<u> </u>	
Name of New Registered Agent			<u> </u>
	N/A		
	(Florida str	eet address)	
New Registered Office Address:	N/A		 Fl or ida
To the state of th		(City)	(Zip Code)
New Registered Agent's Signature, if of thereby accept the appointment as regis	changing Registered Agent	<u>:</u> with and amount the obligations	
Therety accept the appointment as regis	ierea agem. Tam jammar	wan and accept the obligations	
	Signature of New R	egistered Agent, if changing	
Check if applicable			
☐ The amendment(s) is/are being filed [oursuant to s. 607.0120 (11)	(e), F.S.	
•	·		11

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President: V= Vice F Executive Officer; CFO = President, Treasurer, Dire Changes should be noted	and/or Di if necessa ector title President; Chief Fir ector wou in the foll wes the co	rector be ary) by the fin T= Trea ancial O, ld be PTL lowing ma rporation	rst letter of the office title: surer: S= Secretary: D= Director: TR= Ti fficer. If an officer/director holds more that D. unner. Currently John Doe is listed as the i s. Sally Smith is named the V and S. These s	rustee; C = Cl a one title, list t PST and Mike :	girman or Clerk: CEO = Chie, he first letter of each office held Jones is listed as the V. There is
X Change	<u>PT</u>	John Do			
X Remove	<u>V</u>	Mike Jor	<u>ies</u>		
X Add	<u>sv</u>	Sally Sm	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name	Address	
1) Change	N/A —	_	N/A	N/A	
Add					<u> </u>
Remove					<u> </u>
2) Change		-			
Add					
Remove 3) Change		_			
Add					
Remove					
4) Change		-			
Add					
Remove					<u> </u>
5) Change		-			<u> </u>
Add					<u> </u>
Remove					<u> </u>
6) Change		_			<u> </u>

__ Add

__ Remove

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
N/A	
	<u>'</u>]
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F. 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)	
110	<u> </u>
N/A	
	[]
	[
	<u>'</u>
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	[]

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
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, the document's effective date on the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholde action was not required.	r action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	 nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following some 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 N/A	
(voting group)	
Dated 4-10-2024 Signature // P	
(By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	
Dominick Leonardi	
(Typed or printed name of person signing)	1
CEO	
(Title of person signing)	