

P95000046867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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Amend

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2024 AUG -7 AM 11:10
CLERK OF STATE
STATE OF ARIZONA

A. RAMSEY
AUG 8. 2024

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STATE OF ARIZONA

CT CORP
(850) 656- 4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 08/07/2024
 Acc#I20160000072

en: c DW

Name:	VERIFIER INC.
Document #:	
Order #:	15805074

Certified Copy of Arts & Amend:	<input type="checkbox"/>	
Plain Copy:	<input type="checkbox"/>	
Certificate of Good Standing:	<input type="checkbox"/>	
Certified Copy of	<input type="checkbox"/>	
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:
		Number of Certs:

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W.P. Verifier _____
Ref# _____

Amount: \$ **43.75**

Thank you!

Articles of Amendment
to
Articles of Incorporation
of

FILED
2024 AUG -7 AM 11:10
STATE OF FLORIDA
TALLAHASSEE, FL

VERIFIER INC.

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

P95000046867

(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:

_____ The new 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."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

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:

Name of New Registered Agent C T Corporation System
1200 South Pine Island Road
(Florida street address)

New Registered Office Address: Plantation, Florida 33324
(City) (Zip Code)

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.

Stephanie Hencz Stephanie Hencz, Assistant Secretary
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 = 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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>P</u>	<u>Addi J. Aloya</u>	<u>4171 W. Hillsboro Blvd Ste 2</u>
<input type="checkbox"/> Add			<u>Coconut Creek, FL 33073-2154</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>CFO</u>	<u>Aaron Wray</u>	<u>4171 W. Hillsboro Blvd Ste 2</u>
<input checked="" type="checkbox"/> Add			<u>Coconut Creek, FL 33073-2154</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>D</u>	<u>Dax Brady-Sheehan</u>	<u>4171 W. Hillsboro Blvd Ste 2</u>
<input checked="" type="checkbox"/> Add			<u>Coconut Creek, FL 33073-2154</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>D</u>	<u>Clayton Finley</u>	<u>4171 W. Hillsboro Blvd Ste 2</u>
<input checked="" type="checkbox"/> Add			<u>Coconut Creek, FL 33073-2154</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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)

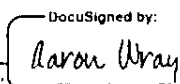
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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
 by _____"
(voting group)

Dated August 7, 2024

Signature  _____
 (By 17798A3D05114F0... it 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)
 Aaron Wray

 (Typed or printed name of person signing)
 CFO

 (Title of person signing)