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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORAT	ION:	FINS, INC. F. N	.S., INIĈ.		
DOCUMENT NUMBER		P95000051691			
The enclosed Articles of A	mendment and fee are sub	mitted for filing.			
Please return all correspon	dence concerning this mat	er to the following:			
	SHERRY WIPPER				
	Name of Contact Person				
		-FNS, INC F. N	.S. INC.		
		Firm/ Company			
		17025 DISK DR.			
		Address			
	SPRING HILL, FLORIDA 34610				
	City/ State and Zip Code				
	ROXANNE2B@AOL.COM				
	E-mail address: (to be used for future annual report notification)				
	oncerning this matter, pleas		56 3936		
Name of Contact Person		at (vtime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	Certified Copy Cert (Additional copy is Cert enclosed) (Ad	.50 Filing Fee ificate of Status ified Copy ditional Copy nclosed)		
Amend Divisio P.O. Bo	g Address ment Section n of Corporations ox 6327 ssee, FL 32314	Street Address Amendment Se Division of Cot The Centre of 2415 N. Mon Tallahassee, FI	ction porations Tallahassee oe Street, Suite 810		

Articles of Amendment to Articles of Incorporation

of ENSING ENIS INC

\ <u>-</u>	itly filed with the Florida Dept. of	f State)
	00051691	
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopt	ts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must he distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name	the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		202
C. Enter new mailing address, if applicable:		ω
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
		. 16
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name	of the
new registered agent and/or the new registered office addre	<u>2881</u>	
Name of New Registered Agent		
(Florida	street address)	
New Registered Office Address:	, F	lorida
Men regulated office and state	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: or with and accept the obligations of	f the position.
т петеоў ассері те арронітет их гедіметей адеть. Тат затта		•
Signature of New	Registered Agent, if changing	
Charle if applicable		
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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP	RONALD WIPPER	10725 DISK DR. SPRING HILL F
Add			
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			11-77-201-2-7
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional tach additional sheets, if necessar	ry). (Be specifi	(c)			
•					
					
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an amendment provides for an	<u>exchange, recla</u>	<u>ssification, or ca</u>	incellation of issi	ied shares,	
provisions for implementing the	<u>amendment if n</u>	<u>ot contained in</u>	<u>the amendment i</u>	<u>itselt:</u>	
(if not applicable, indicate N/2	(A)				

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The date of each amendmen	(s) adoption:	, if other than the
date this document was signed		
ree at laste andtantita	AUGUST 19, 2021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendn	ient file date)
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors w	ithout shareholder action and shareholder
	re adopted by the shareholders. The number of votes caere sufficient for approval.	est for the amendment(s)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. Ed for each voting group entitled to vote separately on t	The following statement he amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for app	roval
by	SHERRY & RONALD WIPPER	.**
o:	(voting group)	
Dated	AUGUST 19, 2021	
	Shew Wipper	
Œ	By a director, president or other officer – if directors or	officers have not been
	elected, by an incorporator – if in the hands of a receive ppointed fiduciary by that fiduciary)	r, trustee, or other court
	SHERRY WIPPER	
	(Typed or printed name of person sign	ning)
	PRESIDENT	
	(Title of person signing)	