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P	
(Requestor's Name)	
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	-
Special Instructions to Filing Officer:	1



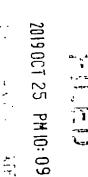


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COVER LETTER

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Tallahassee, FL 32301

FO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MARTHA HEAD	INGS INC	
DOCUMENT NUMB		**	
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
ř	MARTHA HEADINGS		
_	•	Name of Contact Person	1
ì	MARTHA HEADINGS INC		
_		Firm/ Company	
3	24 OAK HILL WAY		
_		Address	
\$	SARASOTA FL 34232		
_		City/ State and Zip Cod	e
pamela	y28@comcast.net		
· 	·	sed for future annual report	notification)
		•	·
For further information	concerning this matter, pleas	se call:	
PAMELA YUTZY		941 at (378-4171
Name of Contact Person		at ()	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio Clifton	Address Iment Section on of Corporations Building
Tallahassee, FL 32314		2001 E	xecutive Center Circle

Articles of Amendment to Articles of Incorporation of

MARTHA HEADINGS INC.	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P95000074408	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	
	- · · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent N/A	
(Florida s	treet address)
New_Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New	Registered Agent, if changing

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>	<u>Addres</u> s
1) Change	S	RICKY HEADINGS	463 STANTON DR
X Add			SPRINGBORO OH 45066
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	imending or adding additional Articles, enter change(s) he ach additional sheets, if necessary). (Be specific)	re:	
	acu adamonai sneeis, y necessary). (ne specific)		
/A			
	<u></u>		
		· · · · · · · · · · · · · · · · · · ·	
		N	
. <u>Han</u> Dro	in amendment provides for an exchange, reclassification, or covisions for implementing the amendment if not contained	or cancellation of issued shares, I in the amendment itself:	
<u> </u>	(if not applicable, indicate N/A)		
/A			
			· · · · · · · · · · · · · · · · · · ·
		<u>-</u>	
	_		

The date of each amendment(s):	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	proved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
OCTOBE Dated	R 23, 2019	
Signature	Taut Daling	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	MARTHA HEADINGS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	