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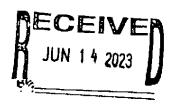
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MUHTS and More, Inc
DOCUMENT NUMBER: N19 0000 6171
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pei Pa Possery (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
(1 title Company)
1652 Parkside Dr
Clarwata, to 33756 (City/State and Zip Code) Was in Nancy Muttshmore1@gman.com E-mail address: (to be used for future annual report notification)
Mearwata, PL 33156
(City/State and Zip Code) Nas in Nancy
Mantehmand Danson Logia
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
to further intermation concerning this matter, pieuse can.
PUPU POSSEULU at 813/476-1002 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee
Certificate of Status Certified Copy Certificate of Status
(Additional copy is Certified Copy enclosed) (Additional Copy is
Enclosed) Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section
Division of Corporations Division of Corporations



P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Muts and	1 More	(w)	
(Name of Corporation as currently filed with the Florida	Dept. of State)		
N1900000	.171		
(Document Numb	er of Corporation (if known	own)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For</i>	Profit Corporation adopts the	following
A. If amending name, enter the new name of the corporat	tion:		
			The new
name must be distinguishable and contain the word "corpora	tion" or "incorporated"	or the abbreviation "Corp." o	r "Inc."
"Company" or "Co." may not be used in the name.	1150	D. 1 a. 1 a. h	\
B. Enter new principal office address, if applicable;	1602	tarkside 1	<u>Y</u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Choan	ivater to	
		22751	
		2010/	
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	-,		
			175
			St. Hay Id
D. If amending the registered agent and/or registered offi	ce address in Florida, o	enter the name of the	17
new registered agent and/or the new registered office a			PH 12:
M. CAL De Sangal Annat			7.
Name of New Registered Agent:			6
	(Flo	rida street address)	
New Registered Office Address:	• •	·	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		he obligations of the position.	
	ignature of New Register	red 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 X Remove X Add	PT John I V Mike SV Sally	Jones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	_5_	Lindsay Suc	minen 2661 Megan Court Paru Hurbor Fr 3468
Remove 2) Change Add	S	Tammy Valle	me
Remove 3) Change Add Remove	I	Charlie Kre	bs 5350 4 5th Are N 54. Deterslang, Fr.
4) Change Add	I	Inamas Pos	
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Ar is, if necessary).	ticles, enter change(s) here: (Be specific)	٠.

The date of each amendment(s) adoption:
The date of each amendment(s) adoption: (20) . 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 members and the number of votes cast for the amendment(s) was/were sufficient for approval.

×	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated June 12, 2023
	Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	President (Title of person signing)