## P05000102197

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ML

## **COVER LETTER**

TO: Amendment Section Division of Corporations

	MBER:
he enclosed <i>Artic</i>	les of Amendment and fee are submitted for filing.
Please return all co	rrespondence concerning this matter to the following:
	Ron Evron
	Name of Contact Person
	Firm/ Company
	4200 NW 16 Street, Suite 227
	Address
	Lauderhill, FL 33313
	City/ State and Zip Code
	revron6426@aol.com
	E-mail address: (to be used for future annual report notification)
for further informa	ation concerning this matter, please call:
<u> Ron</u> Eyron	at ( 2954 ) 295-9467
Nar *j : •	ne of Contact Person Area Code & Daytime Telephone Number

Certified Copy

enclosed)

(Additional copy is

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certificate of Status

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(Additional Copy is enclosed)

## Articles of Amendment to Articles of Incorporation of

QUICK TAG, INC.		
( <u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)
P05000102197		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
		The new
	Sorp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word ."
B. Enter new principal office address,		4200 NW 16 Street, Suite 227
(Principal office address <u>MUST BE A S</u>		Lauderhill, FL 33313
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4200 NW 16 Street. Suite 227
		Lauderhill, FL 33313
D. If amending the registered agent ar		
new registered agent and/or the ne		<u>s:</u>
Name of New Registered Agent	Ron Evron	SECRET
	4200 NW 16 Street, Suite	: 227
	(Florida s	street address)
New Registered Office Address:	Lauderhill	Florida 33313 (700)
Ten Registered Synce Stations.		(City) (Zip Code)
1. A.		(City) (Zip Code) 2: Ci
li sur		TIE 00
New Registered Agent's Signature, if c	hanging Registered Agen	
I hereby accept the appointment as regis	tered agent. I am familiar	r with and accept the obligations of the position.
	Signature of Yew	Registered Agent, if changing
Check if applicable		YAN F.C.
☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11	) (e), r.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)

Remove

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	DPST	Ron Evron	4200 NW 16 Street, Suite 227
Add		<del></del>	Lauderhill, FL 33313
Remove			<u>-</u>
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	<del></del>		
Add			SF(C)
Remove			SECRIT
5) Change	····		工
Add			ဟိုဝ အ
Remove			<u></u> ;
6) Change			
Add			

ttach additional sheets, if necessary). (Be specific)	
	<del></del>
	<del></del>
an an administration for an archaeon males iffication as a males of issued them.	
an amendment provides for an exchange, reclassification, or cancellation of issued share provisions for implementing the amendment if not contained in the amendment itself;	<u>:5,</u>
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	<u> </u>
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
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(if not applicable, indicate N/A)	SECI TAI
(if not applicable, indicate N/A)	SECRE.
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(if not applicable, indicate N/A)	SECRETARY -8
(if not applicable, indicate N/A)	SECRETASY OF STATE

	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirements, this date we repartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareholder action a	nd shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach 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)	
selecte	lirector, president or other officer – it 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)	S1
	Ron Evron	2023 HA SECRE
	(Typed or printed name of person signing)	Y -8
	President	is <
	(Title of person signing)	PH 2: 00 CF STATE SEE, FL

