Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H24000014822 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SCOPINO & ASSOCIATES, LLC

Account Number : I20230000114 Phone : (727)442-1120 Fax Number : (727)562-2816

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN MINDCRYME INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00



January 10, 2024

FLORIDA DEPARTMENT OF STATE Division of Corporations

SCOPINO & ASSOCIATES, LLC

SUBJECT: MINDCRYME INC

REF: W24000002708

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

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Tekayla T Matthews Regulatory Specialist II New Filings Section

FAX Aud. #: H24000010270 Letter Number: 824A00000500

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MINDCRYME IN	C.			
	BER: P06000028487		***************************************		
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	itter to the following:			
	CARL B SCHUSTER				
	Name of Contact Person				
	MINDCRYME INC.				
	Firm/ Company				
	4134 LAKE CONWAY WOODS BLVD				
	Address				
	ORLANDO, FL 32812				
	City/ State and Zip Code				
	minderyme.inc@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, plea	se call:			
Antonio Scopino		at (<u>72</u> 7	4421120		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or 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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section In of Corporations Interest of Tallahassee S. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	as currently filed with	the Florida Dept. of State)
P06000028487		
(Docume	nt Number of Corporation	n (if known)
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Prof	fit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the cor	poration:	
Mincry.Inc.		The new
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc." of "chartered." "professional association," or the abbrevi	or "Co". A professione	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)	
		····
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		·

D. If amending the registered agent and/or registered		da, enter the name of the
new registered agent and/or the new registered of	lice address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		ept the obligations of the position.
	•	
<u></u>		
Signatu	ire of New Registered Age	ent, if changing
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 60°	7.0120 (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)

Example:

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.

X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
Remove			**************************************
2) Change			······
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
* * * * * * * * * * *			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	
If an amendment provides for an exc provisions for implementing the amo (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

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, t document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholds action was not required.	er action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	inent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following s 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"	
hy" (voting group)	
11/29/2023	
Dated	
Land Colonetor	
Signature (By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that tiduciary)	
Carl Schuster	
(Typed or printed name of person signing)	
ceo	
(Title of person signing)	,