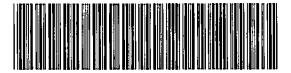
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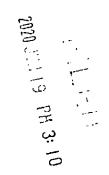
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Amend

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COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: Jessica Wade Inc. DOCUMENT NUMBER: P100000 28527 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jessica Wade Pfeffer Name of Contact Person Jessica Wade Inc. 9825 NE 2 Ave., #530309 Mi ami FL 33153
City/ State and Zip Code jessica@jwipr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tessica W. Pfeffer at 305 8048424

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: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

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Jessica Wade	T11C.				
· · · · · · · · · · · · · · · · · · ·	ly filed with the Florida Dept. of State)				
P100000 2952					
(Document Number o	of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to				
A. If amending name, enter the new name of the corporation:					
	The new				
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word				
B. Enter new principal office address, if applicable:	9825 NE 2 AVE, #530309				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Miami, FL 33153				
	,				
C. Enter new mailing address, if applicable:	000 - 45 2 2 4 - 2 2 0				
(Mailing address MAY BE A POST OFFICE BOX)	9825 NE 2 Ave, #530309				
	Miami FL 33153				
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the				
new registered agent and/or the new registered office address	<u>s:</u>				
Name of New Registered Agent JESSICA V	Nade Pfeffer				
9825 NE	2 Ave, #530309				
(Florida su	reet address)				
New Registered Office Address:M.am.	(City) - 7. Florida 33 15 3 (City) (Zip Code)				
	(chy)				
No. 10 The Control of					
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>ii</u> with and accept the obligations of the position. 🔀				
	20				
	Registered Agent if changing				
Signature of New R	Registered Agent, if changing				
Check if applicable	PH 1				
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e). F.S.				
	10				

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		·
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		<u>-</u> -		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				<u> </u>
Remove				

Attach additional sheets, if necessary)	. (Be specific)				
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	change, reclassif	fication, or cancel	lation of issued :	shares,	
f an amendment provides for an ex	nendment if not	contained in the a	<u>imendment itsel</u>	<u>f:</u>	
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The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date if applicable: (no more than 90 day)	s after amendment file date)
Note: If the date inserted in this block does not meet the applicable locument's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board action was not required.	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The num by the shareholders was/were sufficient for approval.	ber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote s	
"The number of votes east for the amendment(s) was/were suf	ficient for approval
by	
(voting group)	
Dated 6/15/2020	_
Signature (By a director, president or other officer – selected, by an incorporator – if in the han appointed fiduciary by that fiduciary)	
**	a Wade Pfeffer
(Typed or printed name	of person signing)
Presiden-	
(Title of person signing)