P1800092839

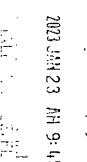
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AD CONCEPTS I	.EGACY, INC.	
DOCUMENT NUM			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	DEVIN WALSH		
		Name of Contact Person	1
	AD CONCEPTS LEGACY.	INC.	
		Firm/ Company	
	116 ROYAL PARK DR STE	, ,	
		Address	
	OAKLAND PARK, FL 3330	9	
		City/ State and Zip Code	e
	Devinwalsh@geiger.com		
	E-mail address: (to be us	sed for future annual report	notification)
	on concerning this matter, plea		220, 9209
DEVIN WALSH	0.0	at (610) 220-9209
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	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

2023 JAH 23 AH 9: 45

AD CONCEPTS LEGACY, INC.

(Name o	of Corporation as curren	itly filed with the Florida Dept. of		
P1800002839	P1800009283	9	livi.L.	公司,推
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopt	s the following	amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		,	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	Torp," "Inc," or "Co".	A professional corporation name	he abbreviation	"Corp., "
R - Enter new principal office address.	if applicable:	116 ROYAL PARK DR STE	2I ⁵	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		OAKLAND PARK, FL 33305)	
C. Enter new mailing address, if appl		116 ROYAL PARK DR STE	2F	
(Mailing address MAY BE A POST	UFFICE BUX)	OAKLAND PARK, FL 33309		
D. If amending the registered agent ar new registered agent and/or the new	d/or registered office addr	Idress in Florida, enter the name o	of the	
Name of New Registered Agent		TING & TAX SERVICES, INC.		
mant of the negatives zigem	5220 SW 64TH AVE			
	(Florida	street address)		
New Registered Office Address:	DAVIE		orida	
		(City)	(Zip Co	ide)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Age ered agental am familia	nt: r with and accept the obligations of	the position.	
	Um E	Send	·	
.	Signature of New	Registered Agent, if changing		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (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 = ChiefExecutive 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>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 Change			
Add			
Remove			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Romove			

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)		
			
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· 			
			<u> </u>
			
			
			
	ور مور ر		ah . waa
an amendment provides for an exchorovisions for implementing the ame	range, reclassification, or ci	the amendment itself	snares,
(if not applicable, indicate N/A)	nament ii not contained iii	the amendment uses	1.
(y nor appartime, macare row)			
			<u></u>
		<u> </u>	·
	<u> </u>		

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The date of each amendment(s) a	deption:	, 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 I document's effective date on the D	plock does not meet the applicable statutory filing requirements, this date will epartment of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action and	d shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.	
The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
JANUAR'	Y 16, 2023	
DatedSignature	Derink Jaleh	
selecte	fire tor, president or other officer – if directors or officers have not been ad, by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)	
	DEVIN WALSH	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	