P21000094785

(Ře	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		}
	Q. SILAS	
ز	AN 05 2022	





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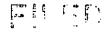


COVER LETTER

TO: Amendment Sec Division of Corp		•	•	
NAME OF CORPO	RATION: PHOENIX MS IN	C.	•	
	BER: P21000094785			
	of Amendment and fee are su			
Please return all corre	espondence concerning this ma	itter to the following:		
	ANTON SAMOILA			
		Name of Contact Person		
	PHOENIX MS INC.			
		Firm/ Company		
	918 NE 7th Terrace, Unit# 3.	• •		
		Address		
	Cape Coral, FL 33909			
		City/ State and Zip Code		
	TS@PHOENIXMS.RO			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, plea	se call:		
ANTON SAMOILA		at (⁷⁵⁷	403-4126) de & Daytime Telephone Number	
Name	Name of Contact Person		le & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	_	
Mailing Address			Address	
Amendment Section			Amendment Section	
Division of Corporations			n of Corporations	
P.O. Box 6327 Tallahassee, FL 32314			entre of Tallahassee L Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation



PHOENIX MS INC.			
(Name of Corneration or aurrently 6			
(Name of Corporation as currently in	led with the Florida Dept: of State)		
P21000094785	1 .5.		
(Document Number of Co	orporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	erida 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," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	pany," or "incorporated" or the abbreviation "Corp.,"		
D. Patan and administration of the address of applicables	918 NE 7th Terrace, Unit# 3,		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	Cape Coral, FL 33909		
	·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	918 NE 7th Terrace, Unit# 3.		
-	Cape Coral, FL 33909		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the		
Name of New Registered Agent			
	address)		
New Registered Office Address:	, Florida		
(Ci			

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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	PT	<u>John Doe</u>	
\underline{X} Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
T) Change	D	ANTON SAMOILA	918 NE 7TH TERRACE, UNIT# 3
XAdd			CAPE CORAL, FL 33909
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

	additional sheets, if necessary). (Be specific)
THE	CHANGES WE ARE MAKING CONSIST OF:
1.	WE ARE CHANGING THE ADDRESS OF OUR BUSIN
	918 HE 7TH TERRACE, UNIT#13, CAPE CORAL, FL 33
<u>2.</u>	WE ARE ADDING ANTON SAMOILA AS OFF
	OF OUR COMPANY, ANTON SAMOILA WIT
	AS MANAGING DIRECTOR OF OUR COMPA
<u>3.</u>	ALL FUTURE COMUNICATION BETWEEN YO
	DIVISION AND OUR COMPANY SHOULD R
	DIRECTED TO ANTON SAMOILA:
	- TEL: 757-403-4126
	-FAX: 757-299-2318
	- EMAIL: TS@PHOENIXMS. RO
	
provisio	condment provides for an exchange, reclassification, or cancellation of issued shares, ons for implementing the amendment if not contained in the amendment itself:
(if r	not applicable, indicate N/A)
·	

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 fi	le date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requi Department of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without	shareholder action and shareholder
(1) The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for sufficient for approval	the amendment(s)
U The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amo	following statement endment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
12/07/20 Dated		
selec	director, president or other officer – if directors or officer, led, by an incorporator – if in the hands of a receiver, trust need fiduciary by that fiduciary)	
	PARAU-DUHAN, STEFAN	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	