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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

Trophyland DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jaclyn Marron
Name of Contact Person Trophyland USA, Inc 1001 W. 20th Ave, Ste A-1 Hialeah, FL 33014
City/State and Zip Code info@trophyland.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jaclyn Marron at (305) 823-4830
Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

## Articles of Incorporation

FILED

2027 JUN 10 PM 12 DI Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Hialpah , Florida 33014 New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Check if applicable

 $<sup>\</sup>Box$  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)

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 Doc	
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
1) Change	P	Dennis S. Hendrix	7001 W. 20th Ave
Add			Hialeah, R. 33014
2) Change Add		Donald Brantley	7001 W. 20th Ave Hialeah, FL 33014
Remove Change Add	_P	Jaclyn Marron	100) w. 20+5 Ave ste A-1 Hialeah, FL 33014
Remove 4) Change Add			
Remove 5) Change Add	_		
Remove 6) Change Add Remove			

If amending or adding additional A Attach additional sheets, if necessary			
NA			
			<del></del>
·			
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·			
f an amendment provides for an e	change, reclassification, or o	ancellation of issued shares,	
provisions for implementing the a (if not applicable, indicate N/A)	mendment if not contained in	the amendment itself:	
The shares of	ctonk and the	and formal to	
Jaciyn Marron	Trom Lenn	is S. Henarix	
·· · · · · · · · · · · · · · · · · · ·			<del></del>

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> : N   H (no more than 90 days after amendment	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing red document's effective date on the Department of State's records.	quirements, 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 of directors witho action was not required.	ut shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast f by the shareholders was/were sufficient for approval.	or the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the a	
"The number of votes cast for the amendment(s) was/were sufficient for approve	tl
by	·•
(voting group)	
Dated	
Signature	
(By a director, president or other officer – if directors or officered, by an incorporator – if in the hands of a receiver, to	
appointed fiduciary by that fiduciary)	ance, or onisi court
(Typed or printed name of person signing	
(Typed or printed name of person signing	
President	
(Title of person signing)	