534806

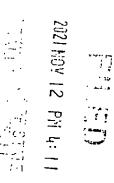
| (Requestor's Name) | | | | |
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| (Address) | | | | |
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| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
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| (Document Number) | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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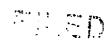
COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: 114 BISCAYNE, I | NC. | |
|-------------------------|--|--|---|
| DOCUMENT NUM | | | |
| | of Amendment and fee are sub | omitted for filing. | |
| Please return all corre | spondence concerning this mat | tter to the following: | |
| | SHERRIA ELLIOTT | | |
| | _ | Name of Contact Persor | 1 |
| | 114 BISCAYNE INC | | |
| | | Firm/ Company | |
| | 15757 PINES BLVD SUITE | 298 | |
| | | Address | |
| | PEMBROKE PINES, FL 330 |)27 | |
| | | City/ State and Zip Code | e |
| | 114BISCAYNEINC@GMAI | L.COM | |
| | E-mail address: (to be us | ed for future annual report | notification) |
| For further information | on concerning this matter, pleas | se call: | |
| SHERRIA ELLIOTT | | at (⁷⁸⁶ | de & Daytime Telephone Number |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check f | or the following amount made | payable to the Florida Dep | 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) |
| An Div P.C | niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314 | Amend Division The C | Address Imment Section on of Corporations Ientre of Tallahassee N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



| (Name of Corporation | 2021 MOV 12 PH 41 H on as currently filed with the Florida Dept. of State) |
|--|---|
| 534806 | SIME |
| (Docum | nent Number of Corporation (if known) |
| ursuant to the provisions of section 607,1006, Florida s Articles of Incorporation: | a Statutes, this Florida Profit Corporation adopts the following amendme |
| . If amending name, enter the new name of the co | orporation: |
| | The new |
| name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbre | orporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word eviation "P.A." |
| 3. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u> | |
| | |
| | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE RO |) (() |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u> | <u></u> |
| | DX) |
| | DX) |
| (Mailing address <u>MAY BE A POST OFFICE BO</u> | red office address in Florida, enter the name of the |
| (Mailing address MAY BE A POST OFFICE BO. D. If amending the registered agent and/or register | red office address in Florida, enter the name of the |
| (Mailing address MAY BE A POST OFFICE BO. 1. If amending the registered agent and/or register new registered agent and/or the new registered. | red office address in Florida, enter the name of the |
| O. If amending the registered agent and/or register new registered agent and/or the new registered. | red office address in Florida, enter the name of the |
| (Mailing address MAY BE A POST OFFICE BO. D. If amending the registered agent and/or register new registered agent and/or the new registered. | red office address in Florida, enter the name of the office address: |

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)

Remove

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 Doe Mike Jones X Remove <u>SV</u> \underline{X} Add Sally Smith Address Type of Action Title Name (Check One) TERRY ELLIOTT 15757 PINES BLVD SUITE 298 **PSTD** 1) Change XXPEMBROKE PINES, FL 33027 Add ____ Remove **PSTD** TERRY ELLIOTT SR 15757 PINES BLVD SUITE 298 2) ____ Change PEMBROKE PINES, FL 33027 Add Remove Change Add __ Remove Change __ Add Remove 5) Change ___ Add Remove 6) Change Add

| ttach additional sheets, if necessary). | cles, enter change(s) here. (Be specific) |
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| f an amendment provides for an exch | nange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame | ndment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
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| • | 10/09/2021 | |
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| The date of each amendment(s) ad date this document was signed. | option: | , if other than the |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days | after amendment file date) |
| Note: If the date inserted in this blocument's effective date on the Dep | | tatutory filing requirements, this date will not be listed as t |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were adopaction was not required. | nted by the incorporators, or board of | of directors without shareholder action and shareholder |
| ☐ The amendment(s) was/were adop by the shareholders was/were suf | | per of votes cast for the amendment(s) |
| ☐ The amendment(s) was/were appoint must be separately provided for a | roved by the shareholders through veach voting group entitled to vote so | oting groups. The following statement eparately on the amendment(s): |
| "The number of votes cast f | or the amendment(s) was/were suff | icient for approval |
| by | | " |
| | (voting group) | |
| Dated//_ | 7/21 | |
| Signature | en Ellit | |
| (By a di selected | ector, president or other officer – it | f directors or officers have not been is of a receiver, trustee, or other court |
| | TERRY ELLIOTT | |
| | (Typed or printed name | of person signing) |
| | PRESIDENT | |
| | (Title of person signing) | |



FLORIDA DEPARTMENT OF STATE Division of Co. Division of Corporations

October 25, 2021

TERRY ELLIOT 114 BISCAYNE INC. 15757 PINES BLVD, SUITE 298 PEMBROKE PINES, FL 33027 US

SUBJECT: 114 BISCAYNE, INC.

Ref. Number: 534806

We have received your document for 114 BISCAYNE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 821A00025880

Anissa Butler Regulatory Specialist II

www.sunbiz.org