535351

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: C.O.D. SUPPLIES	SINC.		
DOCUMENT NUM				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	JANETT DE VERA			
	Name of Contact Person			
	Firm/ Company			
	1010 EAST 41ST STREET			
		Address	 	
	HIALEAH, FL 33013			
		City/ State and Zip Code	e	
	CODSUPPLIES@HOTMAI	ICOM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, plea.	se call:		
JANETT DE VERA		at (8361031	
Name of Contact Person Area Code & Daytime Teleph		de & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	S43.75 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	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

FILED

2022 FEB 23 AM 11: 44

C.O.D. SUPPLIES INC.

(Name of Corporation as currently filed with the Florida Depts at State) RY OF STATE TALL AHASSEE, FL 535351 (Document Number of Corporation (if known) 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 (Florida street address) New Registered Office Address: ___ ____, Florida_ (City) (Zip Code) 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. 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)

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 Doc 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	<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	VP	JANETT DE VERA	1010 EAST 41ST STREET
X Add			HIALEAH, FL 33013
Remove			
2) Change	<u> </u>		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
provisions for implementing the amendment if not contained in the amendment itself:		
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(ly not applicame, material N/A)	provisions for implementing the amendment if not contained in the amendment itself:	
	(if not applicame, materic NA)	
		••••
		<u> </u>
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	t(s) adoption:	, if other than the
date this document was signed Effective date <u>if applicable</u> :	02/18/2022	
	(no more than 90 days after amendment file do	tej
	this block does not meet the applicable statutory filing requirement be Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shar-	eholder action and shareholder
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes east for the a ere sufficient for approval.	imendment(s)
	re approved by the shareholders through voting groups. The followed for each voting group entitled to vote separately on the amenda	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
02/18/ Dated	2022	
Dated		
Signature		
SC	y a director, president or other officer – if directors or officers hav lected, by an incorporator – if in the hands of a receiver, trustee, oppointed fiduciary by that fiduciary)	
	HIPOLITO DE VERA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	