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COVER LETTER

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment

Articles of Inco	rporation		
Costo De Bod C	has Too		
(Name of Corporation as correctly	filed with the Florida Dept. of State)		
7,569	1 1		
(Document Number of	Composition (if known)		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the follow	ing amendme	nt(s) to
A. If amending name, enter the new name of the corporation:			
NA		The new	
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbrevial professional corporation name must conte	tion "Corp. "	,
B. Enter new principal office address, if applicable:	NA		
(Principal office address MUST BE A STREET ADDRESS)		:	
		<u> </u>	
C. Enter new mailing address, if applicable:	, 10		
(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 AgentNA			,
· · · · · · · · · · · · · · · · ·			:
(Florida stree	et address)		المبير
		පි	·
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 w	ith 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 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	
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	_5_	Durena Tobia	362 Scott Are
Add Remove			Jarasota LZ4242
2) Change			
Add			
Remove 3) Change			
Add			
Remove			·
4) Change			
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f 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) () A	Attach additi	or adding additional Articles, enter change(s) here: onal sheets, if necessary). (Be specific)	
f 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)		Λ2 <u>Α</u>	
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(if not applicable, indicate N/A)	provisions i	for implementing the amendment if not contained in the amendment itself:	
	(if not a	pplicable, indicate N/A)	
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The date of each amendment(s) a	doption:	, 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 document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	s date will 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 shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendm ufficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following star each voting group entitled to vote separately on the amendment(s):	tement `
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
DatedSignature	15/2022 Lis (meanin-	
selecti	lirector, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other of the fiduciary by that fiduciary)	
,,	(Typed or printed name of person signing)	·
	(Title of person signing)	

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