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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TON: AEO	CORPORAT	TION	
DOCUMENT NUMBER	. <u>J10</u>	004		
The enclosed Articles of A				
Please return all correspon	dence concerning this ma	tter to the following:		<b>2023</b> SE( FALL
	MAT	TEO RON	GA	2023 AUG - 1 PH 12: 23 SECRETARY OF THE ALLIANA SCENE FREE THE SCE
		Name of Contact Person	n	<u></u>
	AEC	CORPOR	ATION	
		Firm/ Company		
	P	0 221428	3	
		Address		ω
	HOLLY	City/ State and Zip Cod	33022	
	-	City/ State and Zip Cod	e	
	A	EO@ GATE	.NET	
		ed for future annual report		<del></del>
For further information co	ncerning this matter, pleas		- ) <i>920 . 300</i> de & Daytime Telephon	00
Name of C	ontact Person	Area Co	de & Daytime Telephon	e Number
Enclosed is a check for the	e following amount made	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	☐\$43.75 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)	5
Amendi Divisior P.O. Bo	Address nent Section of Corporations x 6327 see, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suit	te 810

Taliahassee, FL 32303

## Articles of Amendment Articles of Incorporation

## AEO CORPORATION

(Name of Corporation	as	currently	filed	with t	he	Florida	Dept	. of	State)	į

J 10004 (Document Number of Corporation (if known)

A. If amending name, enter the new name	of the corporation:	N/A			he new
ame must be distinguishable and contain the Inc.," or Co.," or the designation "Corp chartered," "professional association," or	o," "Inc." or "Co"	1 professional c	corporation name mu	st contain t	the word
3. Enter new principal office address, if a Principal office address <u>MUST BE A STR</u>	pplicable: EET ADDRESS )	906 HOL	N 13TH 7	ERRA ,	<u>ICE</u>
			33019	1979 a 15	2
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF	<u>nle:</u> FICE BOX)	N/A	۷	7.60 2.00 2.00 2.00 7.55 2.3	þ23 AUĠ −
					<u>-</u>
D. If amending the registered agent and/onew registered agent and/or the new remains of New Registered Agent	egistered office address	<u>»</u> N/A			PM 12: 23
	906 N 1	3M TE	RRACE		
New Registered Office Address:	HOLLY	(City)	, Florida	3 <b>30</b> (Zip Cod	19 te)
New Registered Agent's Signature, if char hereby accept the appointment as registere	nging Registered Agen d agent. I am familiar	t <u>:</u> with and accept	the obligations of the [	position.	

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	PT	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			N/A	
Add				
Remove			•	
2) Change		_		
Add				
Remove 3 ) Change				
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4) Change				
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6) Change				
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ttach additional she	ets, if necessary).	icles, enter change (Be specific)	<u>of nere</u> .		
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<u>an amendment pr</u> ravisions for impl	ovides for an excl	hange, reclassificat endment if not con	<u>ion, or cancellatio</u> tained in the amen	n of issued snares, dment itself:	
(if not applicab	le, indicate N/A)				
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The date of each amendment(s) adoption:	N/A		, if other than th
date this document was signed.  Effective date if applicable:	N/A		
<u> </u>	(no more than 90 da	vs after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Departmen		statutory filing requirements, this date	e will not be listed as th
Adoption of Amendment(s) (	CHECK ONE)		
The amendment(s) was/were adopted by action was not required.	the incorporators, or board	d of directors without shareholder action	a and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient to		nber of votes east for the amendment(s)	)
☐ The amendment(s) was/were approved by must be separately provided for each vot			ıt
"The number of votes cast for the a	mendment(s) was/were su	ifficient for approval	
by	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(	voting group)		
Dated25 J	ULY 2023	_	
Signature	Matter Ro	rnaa/	
(By a director, p	resident or other efficer	d directors or officers have not been not of a receiver, trustee, or other court	<del></del>
•	iary by that fiduciary)	na of a receiver, transec, or other court	
1	MATTEO	RONGA	
	(Typed or printed name		
F	RESIDENT /	REGISTERED AGEN	<b>1</b> T
	(Title of person signing	g)	<del></del> -

