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C. BRUNBLEY

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: VON E	sseiborn, li	NC		
DOCUMENT NUM	V 0061	11			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
		JUhn Webl Name of Contact Person)		
Von Esseiborn					
POBOX 2390					
	West Palm Blach, Fr. 33402 City/State and Zip Code				
	E-mail address: (to be us	Sed for future amual report	notification)		
For further information	on concerning this matter, pleas	se call:			
_ John	Webb	at (407	567-8042		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	CS43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Section n of Corporations entre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Articles of Inc	corporation
Von Esse	elbain Inc
(Name of Corporation as current)	ly filed with the Florida Dept. of State)
K 88 5	54)
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corporation," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable:	A professional corporation name must contain the word
(Principal office address MUST BE A STREET ADDRESS)	11 /V B
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14 AM 9: 06
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	<u>ss:</u>
Name of New Registered Agent 3540 R	KADYSZEWSKI, ESQ LCA BIVD, Ste III
New Registered Office Address: Pam Beach	City) . Florida 33410 (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 Key-Kegistered 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.

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 Add Remove		<u> </u>	
2) Change			
Add Remove 3) Change			
Add Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

Attach <i>add</i>	ng or adding additional Articles, enter change(s) here: litional sheets, if necessary), (Be specific)
	
provision	edment provides for an exchange, reclassification, or cancellation of issued shares, s for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)
	\ \ \
	N/W
	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 12 8 2021	
(no more than 90 days after a	mendment file date)
Note: If the date inserted in this block does not meet the applicable statutory locument's effective date on the Department of State's records.	filing requirements, 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 direct action was not required.	tors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of volume by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gimust he separately provided for each voting group entitled to vote separately	
"The number of votes east for the amendment(s) was/were sufficient for	or approval
by John Webb	9
(voting group)	
Dated12 8 2	
Signature (By a director, president or other officer – if director selected, by an incorporator – if in the hands of a reappointed fiduciary by that fiduciary)	
John Wel	ob
(Typed or printed name of perso	on erkunik)
UWPER	
(Title of person signing)	