168443

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requ	estor's Name)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Addre	ss)	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Addre	ess)	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	/Oix./O		<u> </u>
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/S	tate/Zip/Phone #)
(Document Number) Certified Copies Certificates of Status	PICK-UP	☐ WAIT	MAIL
(Document Number) Certified Copies Certificates of Status	/Pucin	oss Entity Name	1
Certified Copies Certificates of Status	(Dusin	ess Entity Name,	
Certified Copies Certificates of Status			
	(Docui	ment Number)	<u> </u>
Special Instructions to Filing Officer:	Certified Copies	Certificates of	Status
	Special Instructions to Fili	ng Officer:	•
			I
			;

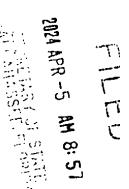
Office Use Only



400427017364

NK & Amena

04/05/24--01020--007 **35.00



A. RAMSEY APR 29 2024

COVER LETTER -

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LOCKEY DIST	RIBUTORS, INC.
DOCUMENT NUMBER: L68443	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Pablo Quesada	
	Name of Contact Person
SMGQ Law	
	Firm/ Company
201 Alhambra Circle Ste 1	205
	Address
Coral Gables FL 33134	
	City/ State and Zip Code
PQUESADA@SMGQLA\	W COM
_	used for future annual report notification)
For further information concerning this matter, pl Pablo S. Quesada	305 377-1000
Name of Contact Person	at () 37744007 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	
\$35 Filing Fee Serificate of Status	Certified Copy (Additional copy is Certified Copy enclosed) Certified Copy (Additional Copy is enclosed) Certificate of Status Certified Copy enclosed
Mailing Address 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 \$10 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2024 APR -5 AM 8: 57

LOCKEY DISTRIBUTORS, INC.

		<u> </u>	
(Name o	of Corporation as curren	tly filed with the Florida Dept. of State) : 1	
L68443			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	ame of the corporation:		
LUCKY LADY, INC.		The new	
	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		1501 S. Surf Road	
		Unit 28	
		Hollywood, FL 33019	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1501 S. Surf Road	
		Unit 28	
		Hollywood, FL 33019	
D. If amending the registered agent an new registered agent and/or the new			
Name of New Registered Agent	201 Alhambra Circle, Su	ite 1205	
		street address)	
New Registered Office Address:	Coral Gables	Florida 33134	
		(City) (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as registed.	tered agent. I am familia. Fall Mues	r 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 <math>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 Doe	
X Remove	Ā	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	SOMNIA PARADELA	1501 S. Surf Road
Add			Unit 28
Remove			Hollywood, FL 33019
2) Change	VP	AMANCIO PARADELA	708 SE 8th Street
Add			Fort Lauderdale, FL 33316
X Remove			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	· ·		
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	
/	
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)	
(y	
	-
	
	

APRIL 3, 2024 The date of each amendment(s) adoption: _ , 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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes east for the amendment(s) was/were sufficient for approval (voting group) **APRIL 3, 2024** Dated (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) SOMNIA PARADELA (Typed or printed name of person signing) **PRESIDENT**

(Title of person signing)