N0900007274

(Requestor's Name)
(Address)
(Address)
(1-1-1-1-1)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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11/15/23--01024--021 **43.75



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 28, 2023

FRANK SEIDL 7699 ARALIA WAY LARGO, FL 33777

SUBJECT: ACE OPPORTUNITIES, INC.

Ref. Number: N09000007274

We have received your document for ACE OPPORTUNITIES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a Florida Not for Profit Corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 323A00027055

Morgan E Lovett Regulatory Specialist II

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: A ce Opportunities, Inc.	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Frank Seid! (Name of Contact Person)	
Ace Opportunities Inc. (Firm/Company)	
7699 Aralia Way	
Largo FL 33777 (City/ State and Zip Code)	•
E-mail address: (to be used for future annual report notification)	orr
	`. 5 \
(Name of Contact Person) at (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)	

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee Articles of Amendment to Articles of Incorporation of

 $\mathcal{L}_{i} = \{ 1, \dots, 2, 1, \dots, k \}$

(Name of Corporation as currently filed with the Florida Dept. of State)				
(Document	Number of Corporation (if known)			
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following			
A. If amending name, enter the new name of the co	rporation:			
	The new orporation" or "incorporated" or the abbreviation "Corp." or "Inc."			
"Company" or "Co." may not be used in the name.				
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>x</u>)			
D. If amending the registered agent and/or register new registered agent and/or the new registered of the new	ed office address in Florida, enter the name of the			
Name of New Registered Agent:				
New Registered Office Address:	(Florida street uddress)			
	, Florida			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.			
	Signature of New Registered Agent, if changing			

The date of each amendment(s) adoption: _______, if other than the

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.

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

date this document was signed.

Effective date if applicable:

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

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.

	· c, and bury thin	ar, or as an mai.	
Example: X Change X Remove X Add	<u>V</u> <u>Mike</u>	Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) _X Change Add	CEO	Frank Seidl	7699 Aralia Way Largo FL 33774
Remove			-
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			-
6) Change Add			
Remove			
E. If amending or add	ing additional A	rticles, enter change(s) here:	
(attach additional sh	eets, if necessary)). (Be specific)	
	<u> </u>		
	<u> </u>		

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. Dated 11/11/2023 Signature Fig. Abeld (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Frank Seid! (Typed or printed name of person signing)