11800005764

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(Only/State/Zip/ None #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certifical coopies
Special Instructions to Filing Officer:

Office Use Only



200314363382

06/07/18--01006--606 **35.60

JUN 0 8 2018 S. YOUNG FILELD

SECKETARE OF STATE

ALLAHASSEF ELORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

YOU HAD ME	E AT MEOW INC
N18000005764	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
RODNEY S WHITE CPA	
	(Name of Contact Person)
RODNEY S WHITE CPA	
	(Firm/ Company)
4650 LIPSCOMB ST NE. SUITE 20	
	(Address)
PALM BAY FL 32905	
	(City/ State and Zip Code)
RODWHITECPA@EARTHLINK.NET	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, p	elease call:
RODNEY S WHITE CPA	321 728-9366
(Name of Contact P	
Enclosed is a check for the following amount ma	nde payable to the Florida Department of State:
S35 Filing Fee	ee & \$\Bigcup \sec \sec \sec \sec \sec \sec \sec \sec
A 7 111 4 1 A	~

Mailing Address

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

YOU HAD ME AT MEOW INC				
(Name of Corporation as c	urrently filed with	the Florida Dept. of S	State)	
N18000005764				
(Document	Number of Corporat	ion (if known)		
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida</i>	Not For Profit Corpe	oration adopts th	ie following
A. If amending name, enter the new name of the cor	poration:			
				The new
name must be distinguishable and contain the word "co "Company" or "Co," may not be used in the name.	orporation" or "inco	rporated" or the abbro	eviation "Corp.	" or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDI</u>	RESS)			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	0		3. 2 2. 3	18 JUN
 If amending the registered agent and/or registered new registered agent and/or the new registered or 		Florida, enter the nar	me of the	SEE FLORI
Name of New Registered Agent:				
New Registered Office Address:		(Florida street addr	evi	
			, Florida	
_	(City)		, Florida (Zīp Code)	
Sew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		l accept the obligation	is of the position	t.
	Signature of Ne	w Registered Agent, if	changing	

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 X Remove X Add	<u>V</u> <u>Mik</u>	<u>a Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	DIR	TARA UNGERSON	219 LUNE COURT
Add			WEST MELBOURNE, FL 32904
X Remove			
2) Change	DIR	TARA UNGER	2191 LUNE COURT
X Add			WEST MELBOURNE, FL 32904
Remove 3) Change	PT	KRYSTAL ADAIR	2191 LUNE COURT
Add			WEST MELBOURNE, FL 32904
Remove			
4) X Change	VPS	YVETTE HARRISON	2191 LUNE COURT
Add			WEST MELBOURNE, FL 32904
Remove			
5) X Change	DIR	BEVERLY HENDERSON	2191 LUNE COURT
Add			WEST MELBOURNE, FL 32904
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	icles, enter change (Be specific)				
					<u> </u>
	 				
				-	
					_
			7 <u></u>		<u> </u>
·· <u>-</u> · -					
_ 					

	date of each amendment(s) adoption: this document was signed.	, if other than the
iffe	ctive date if applicable: (no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not burnent's effective date on the Department of State's records.	e listed as the
Ado	ption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	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 6/1/2019	
	Signature K. Alain	_
	(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)	
	KRYSTAL ADAIR	
	(Typed or printed name of person signing)	
	PRESIDENT-TREASURER	
	(Title of person signing)	