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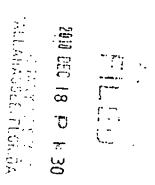
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DEC 2 8 2018
T. LEMIEUX



TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NSB Makeyspace
DACUMENT MUMBED.
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kevin Para
(Name of Contact Person)
NSB Makers pace
(Firm/ Company)
504 Downing St. (Address)
(Address)
New Smyrna Brach, FL 32168 (City/State and Zin Code)
(City/ State and Zip Code)
Kevin J Para Whotmail. com E-mail address: (to be used for future annual report notification)
(No of Electric Marie Milliant report not medicin)
For further information concerning this matter, please call:
Kevin Para 11 386 566-9673
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee

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

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NSB Makers	SPacc	
(Name of Corporation as	currently filed with the Flor	ida Dept sofistine) 8 P 1: 30
N 180000 11755		17,700 1000
(Documen	t Number of Corporation (if ki	nown) IALLANAUSLE, FLOILLUA
Pursuant to the provisions of section 617,1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Foo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "c "Company" or "Co," may not be used in the name.	orporation" or "incorporated	l" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable		
Principal office address <u>MUST BE A STREET ADD</u>	<u>PRESS</u>)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u> </u>	
		
D. If amending the registered agent and/or register new registered agent and/or the new registered of		enter the name of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent:		
	(Fle	orida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi	istored Agent.	
hereby accept the appointment as registered agent.		the obligations of the position.
		,
, 	Signature of New Regist	arad Agant, if champing
	organian e oj new negisti	ства густ, у спануту

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>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
t) X Change Add Remove	P	Alina Dawson	919 Lake Ave Edgewater FL 32132
2) Change Add Remove	<u>s</u> _	Kyle Para	504 Downing St New Smyrna Beach
3) Change Add Remove	_D_	Alex Baldwin	1060 West Clough Ave Lake Helen FL 32744
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if necessary).	(Be specific)
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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 document's effective date on the Department of State's records.	be listed as the
Adoption 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 12/11/2018	
Signature Hina Jauren (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)	
Alina Dawson	
(Typed or printed name of person signing)	
President	
(Title of person signing)	