N1900009797

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
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| (Decument Number) |
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| Certified Copies Certificates of Status |
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| Second Instructions to Filing Office |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

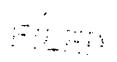
| NAME OF CORPORATION: | | | |
|---|--|----------------------------------|--|
| DOCUMENT NUMBER: | | | |
| The enclosed Articles of Amendment and fee are so | ubmitted for filing. | | |
| Please return all correspondence concerning this ma | atter to the following: | | |
| Kelly L. Fayer | | | |
| | (Name of Contact P | erson) | - |
| Kindl.ee, Inc. | | | |
| | (Firm/ Compan | y) | |
| 601 World Plaza Ln. #2 | | | |
| | (Address) | | |
| Fort Myers, FL 33907 | | | |
| | (City/ State and Zip | Code) | |
| kelly@fayerlaw.net | | | |
| E-mail address: (to be us | sed for future annual rep | port notificatio | n) |
| For further information concerning this matter, plea | ise call: | | |
| Kelly Fayer | at | 239 | 560-3458 |
| (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 □\$43.75 Filing Fee & Certificate of Status | ≥ □\$43.75 Filing Fee S Certified Copy (Additional copy i enclosed) | Certif s Certif | 0 Filing Fee Teate of Status Ted Copy Tional Copy is Osed) |
| Mailing Address | | reet Address | |
| Amendment Section Division of Corporations | | nendment Sect vision of Corpe | |

The Centre of Tallahassee

Tallahassee, Fl. 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of



KindLee, Inc.

| (Name of Corporation as currently filed with the Florida ! | Dept. of State) | West," 12 Fills: 17 |
|---|-------------------------------------|---|
| N19000009797 | | - 1.1 11 |
| (Document Numb | er of Corporation (if known |) . : |
| Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation: | es, this <i>Florida Not For Pro</i> | fit Corporation adopts the following |
| A. If amending name, enter the new name of the corporat | ion: | |
| name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name. | tion" or "incorporated" or | The new the abbreviation "Corp." or "Inc." |
| B. Enter new principal office address, if applicable: | 12601 World Plaza Ln #51 | 2 |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> | Fort Myers, Fl | |
| | 33907 | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 12601 World Plaza En #5: | 2 |
| | Fort Myers, Fl | |
| | 33907 | |
| D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a | | r the name of the |
| Name of New Registered Agent: | | · |
| New Registered Office Address: | (Florida s | treet address) |
| | | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa- | | bligations of the position. |
| | gnature of New Registered 2 | 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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change X Remove X Add | PT John D V Mike Jo SV Sally S | ones | |
|--|--|---|--|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change Add | <u>V, D</u> | Amanda Bartley | 2248 FIRST STREET FORT MYERS, FL |
| × Remove | | | 33901 |
| 2) Change Add | | | |
| X Remove 3) Change Add Remove | | | |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |
| E. If amending or addin (attach additional shee | | icles, enter change(s) here: (Be specific) | |
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| The date of each amendment(s) adoption: _ date this document was signed. | | | , if other than the |
| Effective date if applicable: | | | |
| Effective date <u>if applicable</u> : | more than 90 days after at | nendment file date) | |
| | | | 214 |
| <u>Note:</u> If the date inserted in this block does n document's effective date on the Department | | nory thing requirements, this date | will not be listed as the |
| Adoption of Amendment(s) (C | HECK 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 F12 2024 Signature 1600 April 1900 |
| (By the charman or vice chairman of the board, president or other officer-if directors have not been selected, by an ineprporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| KELLY I. fAYER |
| (Typed or printed name of person signing) |
| PRESIDENT, DIRECTOR |
| (Title of person signing) |