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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 12/2/20

NAME: MIMI PAUL DESIGNS INC

TYPE OF FILING: AMENDMENT

COST:

43.75

RETURN: PLAIN COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

abbie Hodge

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Mimi Paul Design NAME OF CORPORATION:	s Inc		
N20000008113			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	abmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Michelle Paul			
	(Name of Contact Per	son)	
One Check Away, Inc.			
	(Firm/ Company)		·
101 East Jackson Street (Sun Trust Financial Center	) Suite 2340		
The succession brees (out Trust I maneral Center	(Address)		
Tampa, FL 33602			
	(City/ State and Zip C	odc)	
mpaul24@gmail.com			
E-mail address: (to be us	sed for future annual repo	ort notificatio	n)
For further information concerning this matter, plea	se call:		
Darrick T. Paul		404	547-0764
(Name of Contact Pers	on) at		(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida D	epartment of	State:
☐ \$35 Filing Fee	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address		et Address	
Amendment Section Division of Corporations		endment Sect ision of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

### Articles of Amendment to Articles of Incorporation of

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "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 ADDRESS)  Suite 2340  Tampa, FL 33602  C. Enter new mailing address, if applicable:	
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the folloamendment(s) to its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  One Check Away, Inc.  The name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "a "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 ADDRESS)  Suite 2340  Tampa, FL 33602	
A. If amending name, enter the new name of the corporation:  One Check Away, Inc.  name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "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 ADDRESS)  Suite 2340  Tampa, FL 33602	
One Check Away, Inc.  The name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "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 ADDRESS)  Suite 2340  Tampa, FL 33602  C. Enter new mailing address, if applicable:	owing
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "incorporated" or "	
"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 ADDRESS)  Suite 2340  Tampa, FL 33602  C. Enter new mailing address, if applicable:	e new
(Principal office address MUST BE A STREET ADDRESS)  Suite 2340 Tampa, FL 33602  C. Enter new mailing address, if applicable:	Inc."
	<u> </u>
Tampa, FL 33602	2020 DEC -2
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	10:8 HW
Name of New Registered Agent: N/A	<u>~</u>
New Registered Office Address:  401 East Jackson Street (Sun Trust Financial Center), Suite 2340 Tampa Florida 33602	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.  Signature of New 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	PT         John I           V         Mike           SV         Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		<del></del>	
Remove			
2) Change Add		<del></del>	
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
(attach additional shee		ticles, enter change(s) here: (Be specific)	
N/A Nothing Follows			
		1.11	

	——————————————————————————————————————
11/28/2020	
The date of each amendment(s) adoption: 11/28/2020 , if of date this document was signed.	other than
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 list document's effective date on the Department of State's records.	ited 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.	

adopted by the bo	pard of directors.
Dated	11/28/2020
Signature	•
	(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)
	Michelle Paul
	(Typed or printed name of person signing)
	President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were