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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Reel Ladies, Inc.
DOCUMENT NUMBER: N21000007730
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SUSAN D. NICHOLS (Name of Contact Person)
Reel Ladies Inc. (Firm/Company)
3717 Mariner Drive (Address)
Panama City Beach FL 32408
(city) state and s.p code)
Reclades of PCB & Grad Com F-mail address: (to be used for fugure annual report notification)
For further information concerning this matter, please call:
Susan D. Nichols at 850-348-6307 (Area Code) (Daytime Telephone Number)
(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:
\$\times \$\subset\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\subset\$\$\$\subset\$\$\$\subset\$\$\$\subset\$\$\$\subset\$\$\$\subset\$\$\$\subset\$\$\$\subset\$

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

Keel Ladies Inc	<u></u>		
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	-	
Nan	000007731	\mathcal{L}	
(Document	Number of Corporation (if		
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:		For Profit Corporation adopts the fo	ollowing
A. If amending name, enter the new name of the con	rporation:		
			The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.		ted" or the abbreviation "Corp." or	"Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)			
			3
			L. I.
		``````````````````````````````````````	1 .:=
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	a	· :	α .
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		- C 1 (2)	<u> </u>
		باند. 	36
D. If amending the registered agent and/or registere	nd affice address in Florid		
new registered agent and/or the new registered o		a, enter the name of the	
Name of New Registered Agent:			
Name of New Registered Agent.			
		Florida street address)	
New Registered Office Address:	,	r wrut sireel waaress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accep	pt the obligations of the position.	
	Signature of New Regi	stered 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.

Type of Action (Check One) Title Name Address TREA Hope Abbott TREA Hope Abbott Paving City Brach, a 32400 Verenove Change Add Remove Change Add Remove	Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Si	<u>ones</u>	
		<u>Title</u>	<u>Name</u>	<u>Addres</u> s
2) Change	Add	TREA	Hope Abbott	3717 Manner Drive Paruma City Beach, PL 32408
3) Change Add	2) Change			
4) Change	3) Change Add			
5) Change				
Add	Remove			
6) Change				
Add	Remove			
Remove	6) Change Add			
	Remove			
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	E. If amending or addin (attach additional shee	g additional Arti ts, if necessary).	cles, enter change(s) here: (Be specific)	
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document's effective date on the Department of State's records.

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.

are no members or members entitled to vote on the amendment(s). The amendment(s) was/were d by the board of directors.
Dated 752021
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)
Susan D. Nichols
(Typed or printed name of person signing)
President
(Title of person signing)