Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

Account Name : LEGALZOOM.COM INC. Account Number : I20010000062 : (323)962-8600 : (323)962-3889 Fax Number

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN PASSENGERS LITERARY PRESS, INC.

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## COVER LETTER

TO: Amendment Section Division of Corporations

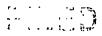
PASSENGERS LIT	TERARY PRESS, INC.		
N21000008833			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subn	nitted for filing,		
Please return all correspondence concerning this matter	r to the following:		
Cheye	enne Moseley		
	(Name of Contact Person	n)	
Legalzoom.com, Inc.			
(Firm/ Company)			
101 N. Bran	nd Blvd., 11th Floor		
-	(Address)		
Glenda	ale, CA 91203		
(City/ State and Zip Code)			
Cust Email			
E-mail address: (to be used	for future annual report (	notification)	
For further information concerning this matter, please call:			
Cheyenne Moseley	800 at (	773-0888 ext. 9724	
(Name of Contact Person)	<del></del>	ode & 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	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address	Straat	A Admoss	

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



2022 JUN 24 PM 1: 02

PASSENGERS LITERARY PRESS, INC.		ion
(Name of Corporation as currently filed with the Florida De	pt. of State)	Million Unit
N21000008833		
(Document Number of Corporation	n (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this Furnendment(s) to its Articles of Incorporation:	Iorida Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corporation:		
		The new
ume must be distinguishable and contain the word "corporation" or "Company" or "Co." may not be used in the name.	"incorporated" or the abbreviation	"Corp." or "Inc."
3. Enter new principal office address, if applicable:	<del>_</del>	<del></del>
(Principal office address MUST BE A STREET ADDRESS)		
<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAYBEA POST OFFICE BOX)		
<del></del> -		
<del></del>		<del></del>
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of th	<u>1e</u>
new registered agent and/or the new registered office address:		_
Name of New Registered Agent:		
(Florido s	treet addressy	
New Registered Office Address:		
	Florida	
(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the	position.
Signature of New Register	ed 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)

Page: 5 of 7

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	$\overline{\underline{\mathbf{V}}}$ $\underline{\underline{\mathbf{Mik}}}$	n Doe te Iones y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	Kimberly Casey	148 Ruby Dr.
X Add	<del></del>		Huntsville, AL 35811
Remove			
2) Change	D	Isabel Wallace	1710 Silverwood Dr.
X Add			Tallahassee, FL 32301
Remove 3) Change	D	Hayley Davis	102 Crown Colony Rd
XAdd			Saint Augustine, FL 32092
Remove			
4) X Change	TD	ANNA WINHAM	180 Sterling Place, Apt 11
Add			Brooklyn, NY 11217
Remove			
5) X Change	PSD	Zachary Furlough	9800 Touchton Road Apt 833
Add			Jacksonville, FL 32246
Remove			
6) Change			
Add			<del></del>
Remove			

E. If amending or adding additional Articles, enter change(s) here (attach additional sheets, if necessary). (Be specific)				
(anach additional sheets, if necessary).	(be specific)			
-				
	<u> </u>			
<del>.</del>				
	<del></del>			

The date of each amendment(s) adoptic date this document was signed.	on: 06/07/2022	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
	(no more man 30 days after amenament fite atte)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
There are no members or members of adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated June 1	5, 2022	
Signature		
have not been se	or vice chairman of the board, president or other officer-if directors coted, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
ZACHARY FURLOU	GН	
(Тур	ed or printed name of person signing)	
PRESIDENT	•	
	(Title of person signing)	