N21000008950

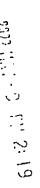
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| Special Instructions to F | -iling Officer: | |
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05/09/22--01018--022 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: Shotokan for All Inc | | | | |
|---------------------------|---|---|--|--|--|
| DOCUMENT NUMB | ER: N21000008950 | | | | |
| The enclosed Articles of | of Amendment and fee are su | bmitted for filing. | | | |
| Please return all corresp | oondence concerning this ma | tter to the following: | | | |
| | | Sonia Becerra | | | |
| - | Name of Contact Person | | | | |
| | Swyft Filings | | | | |
| - | | Firm/ Company | | | |
| | | 3 Greenway Plaza #1320 | | | |
| - | · | Address | | | |
| | Houston, TX 77046 | | | | |
| - | | City/ State and Zip Code | | | |
| | | | | | |
| - | E-mail address: (to be us | barriosdejongh@hotmail.com sed for future annual report notification) | | | |
| | ` | • | | | |
| For further information | concerning this matter, plea | se call: | | | |
| So | nia Becerra | 877 777-0450 | | | |
| Name of Contact Person | | at () | | | |
| name o | i Contact Person | Area Code & Daytine Telephone Number | | | |
| Enclosed is a check for | the following amount made | payable to the Florida Department of State: | | | |
| S35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | | |
| Mailing Address | | Street Address | | | |
| Amendment Section | | Amendment Section | | | |
| | sion of Corporations Box 6327 | Division of Corporations The Centre of Tallahassee | | | |
| | hassee, FL 32314 | 2415 N. Monroe Street, Suite 810 | | | |
| | | Tallahassee, FL 32303 | | | |

Articles of Amendment to Articles of Incorporation of

| | Shotokan for a | | | |
|--|-------------------------------|-------------------------------|--------------|-----------------------|
| (Name of | Corporation as currently | filed with the Florida Dept | . of State | |
| | N21000008 | 950 | | |
| | (Document Number of | Corporation (if known) | | |
| Pursuant to the provisions of section 607.1 ts Articles of Incorporation: | 006, Florida Statutes, this F | Torida Profit Corporation ad | lopts the fo | ollowing amendment(s) |
| A. If amending name, enter the new name | me of the corporation: | | | |
| | | | | The new |
| ame must be distinguishable and contain t Inc., " or Co., " or the designation "Co | | | | |
| chartered," "professional association, " c | | projessional corporation n | ame musi | comunitine word さ |
| | | | | * |
| . Enter new principal office address, if Principal office address <u>MUST BE A ST</u> | | | | |
| rucqui office dadress MOST DE AST | KEET ADDICESS) | | | · . |
| | | | | 3 |
| | | | <u> </u> | |
| Enter new mailing address, if applic | | | | * • • |
| (Mailing address <u>MAY BE A POST O</u> | FFICE BOX) | | | (3) |
| | | | | |
| | | | | |
| | | | | |
| . If amending the registered agent and new registered agent and/or the new | | ss in Florida, enter the nam | ne of the | |
| Name of New Registered Agent | Carlos Barrios | | | |
| | 14196 Rock Salt R | Rd | | |
| - | (Florida stree | | | |
| New Registered Office Address: | Delray Beach | | , Florida | 33446 |
| | | City) | , i londa_ | (Zip Code) |
| | | | | |
| | | | | |
| ew Registered Agent's Signature, if cha | | | | |
| hereby accept the appointment as register | red agent. I am familiar wi | th and accept the obligation: | s of the po. | sition. |
| | AND / | | | |
| X | | | | . |
| | Signature of New Rec | vistered Avent if changing | | |

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 | <u>PT</u> | John Do | <u>ç</u> | | |
|----------------------------|--------------|--------------|------------|-----------------|----------------------|
| X Remove | <u>V</u> | Mike Jos | nes | | |
| <u>X</u> Add | <u>sv</u> | Sally Sn | <u>úth</u> | | |
| Type of Action (Check One) | <u>Title</u> | | Name | <u>Addres</u> s | |
| 1) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 2) Change | | _ | | | |
| Add | | | | | <u></u> |
| Remove 3) Change | | _ | | | · |
| Add | | | | | |
| Remove | | | | | - 12 - 12 - 12 |
| 4) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 5) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 6)Change | | | | | |
| Add | | | | | |
| Remove | | | | | |

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| | |
| an amendment provides for an exchange, reclassification, or can | cellation of issued shares. |
| provisions for implementing the amendment if not contained in the (if not applicable, indicate N/A) | he amendment itself: |
| A) BOLGDDICADIC, BRICCHE (VAI) | |
| у пострыване, такие (ул.) | |
| у постращие, такие мл.) | |
| (у пот аррисате, такае мл.) | |
| (у пол аррисате, такае (ул) | |
| (у пол аррисате, шакане гул) | |
| (у пол аррисате, шакане пул) | |
| (у пол аррисате, такае (ул) | |
| (у пол аррисате, такае пул) | |

.

. .

| The date of each amendment(s) adoptio date this document was signed. | n:1/27/2022 | , if other than the |
|--|---|--------------------------|
| Effective date if applicable: | | |
| enective date <u>n appricame</u> . | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block d document's effective date on the Department | oes not meet the applicable statutory filing requirements, this date went of State's records. | ill not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| | y the incorporators, or board of directors without shareholder action an | d shareholder |
| action was not required. | | , 2 2 2 2 3 |
| ☐ The amendment(s) was/were adopted b by the shareholders was/were sufficier | y the shareholders. The number of votes east for the amendment(s) | ** |
| o, the sizing test was there same. | то приоти. | ; |
| ☐ The amendment(s) was/were approved | by the shareholders through voting groups. The following statement | • |
| must be separately provided for each v | voting group entitled to vote separately on the amendment(s): | 3 |
| "The number of votes east for the | amendment(s) was/were sufficient for approval | ب ي |
| bv | | ξÔ |
| 0. | (voting group) | |
| selected, by a | president of other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court sciary by that fiduciary) CARLOS BARRIOS (Typed or printed name of person signing) | |
| | Treasurer | |
| | (Title of person signing) | |