N21000010510

| (Requestor's Name) | |
|---|--|
| (Address) | 400376432244 |
| (Address) (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | 11/15/2101020003 **43.75 |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | 2022 JAN 20 PM 12: 24 Sedrenary of Society Dalition as the section |
| Las suranue sou | |

Office Use Only

Lumo

UMENT ON DICUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION | January Thirty 1st In | | | | | |
|-------------------------------|---|--|---------------------|--|-------------------------------|---|
| DOCUMENT NUMBER: | N21000010510 | | | | | |
| The enclosed Articles of An | nendment and fee are sub- | mitted for filing. | | | | |
| Please return all corresponde | ence concerning this matt | er to the following: | | | | |
| Emma Clements | | | | | | |
| | | (Name of Contact P | erson) | | | |
| Resilia | | | | | | |
| | | (Firm/ Compan | y) | | | |
| 7548 Plum Street | | | | | | |
| | _, | (Address) | | | | |
| New Orleans, LA 70118 | | | | | | |
| | | (City/ State and Zip | Code) | | | |
| emma.clements@resilia.com | ıı | | | | | |
| | i-mail address: (to be use | | port notification | n) | 7767 | 3 |
| For further information con- | cerning this matter, pleas | e call: | | | 1-10 C | |
| Emma Clements | | સ | 504 L | 952-5-440 | | 20 |
| | (Name of Contact Person | | (Area Code) | (Daytime Tele | ephone-Number | |
| Enclosed is a check for the | following amount made p | ayable to the Florida | | | 19.50 170 July 170 July | 12: 24 |
| □ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | ■\$43.75 Filing Fee Certified Copy (Additional copy enclosed) | Certif is Certif | 0 Filing Fee leate of Status led Copy tional Copy is osed) | . m | ŧ. |
| | | C. | | | | |

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

2022 JAN 20 AM 10: 24

SECRETARY OF STATE TALLAHASSEE, FL

December 9, 2021

EMMA CLEMENTS RESILIA 7548 PLUM STREET NEW ORLEANS, LA 70118

SUBJECT: JANUARY THIRTY 1ST INC

Ref. Number: N21000010510

We have received your document for JANUARY THIRTY 1ST INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Non-Profit Corporation cannot use a DocuSigned signature it must be an original signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 121A00029674

www.sunbiz.org

Division of Company and The Company

Articles of Amendment to Articles of Incorporation of

PLANT PHIP January Thirty 1st Inc. (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N21000010510 name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc "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) C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent: New Registered Office Address: 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.

| P = President; V = Vice I | if necessary) rector title by t President: T= T = Chief Financ | he first letter of the office title: "reasurer: S= Secretary: D= Director ial Officer. If an officer/director hold. | ; TR = Trustee; C = Chairman or Clerk; CEO = Chief's s more than one title, list the first letter of each office |
|------------------------------------|---|---|---|
| | ves the corpore | ition, Sally Smith is named the V and . | ed as the PST and Mike Jones is listed as the V. There is S. These should be noted as John Doe, PT as a Change, |
| Example: X_Change X_Remove X_Add | <u>V</u> <u>Mik</u> | i Doe e Jones v Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add | | | |
| Remove 2) Change Add | | | |
| Remove | | | |
| 4) Change Add | | | |
| Remove 5) Change Add | | | |
| Remove 6) Change Add | | | |
| E. If amending or additional sheet | | Articles, enter change(s) here: c). (Be specific) | |
| Add Article 9: Suppleme | ntal Provisions | · | |
| | | • | ed for one or more exempt purposes within the |

be distributed to the federal government, or to a state or local government, for a public purpose.

| • | | |
|---|--|----------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | _ |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | wa | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | Outubur 12, 2021 | |
| The date of each amendment(s) adoption: date this document was signed. | October 12, 2021 | _, if other than the |
| Effective date <u>if applicable</u> : | o more than 90 days after amendment file date) | |
| (n | o more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does a document's effective date on the Department | not meet the applicable statutory filing requirements, this date will not lof State's records. | oc listed as the |
| Adoption of Amendment(s) | CHECK ONE) | |
| The amendment(s) was/were adopted by was/were sufficient for approval. | y the members and the number of votes east for the amendment(s) | |

| | October 12, 2021 |
|--------|--|
| Dated | |
| Signat | ITE DocuSigned by. |
| | (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) |
| | Whitney Messier |
| | (Typed or printed name of person signing) |

(Title of person signing)