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COVER LETTER

TO: Amendment Section **Division of Corporations**

THE OBSTACL NAME OF CORPORATION:	ES OF LUPUS ORGANIZATION INC.
N2200000300 DOCUMENT NUMBER:	06
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
TIRUANA CLAY	
	(Name of Contact Person)
THE OBSTACLES OF LUPUS ORGANIZATIO	ON INC.
	(Firm/ Company)
4071 L.B. MCLEOD RD STE D	
	(Address)
Orlando, Florida 32811	
	(City/ State and Zip Code)
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	case call:
TIRUANA CLAY	at
(Name of Contact Per	rson) at (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Stat	
Mailing Address	Street Address

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

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

Articles of Amendment to Articles of Incorporation of

THE OBSTACLES OF LUPUS ORGANIZATION INC.

(Name of Corporation as currently filed with the Flo	rida Dept. of State)
N22000003006	
(Document)	Number of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida 3 amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:
	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	PF99)
(Frincipul Office undress <u>Prost BE A STREET ADDI</u>	<u> </u>
	S
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	
	·
	F & O
D. If amending the registered agent and/or registere	
new registered agent and/or the new registered o	ffice address:
Name of New Registered Agent:	
	(Florida sweet address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	stered Agent: 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 Do V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>S</u>	STEPHENS, LACHANDA	4071 LB Mcleod Road Suite D. Orlando, FL 32811
xx Remove			
2) Change Add	<u>M</u>	STEPHENS . LACHANDA	4071 LB Meleod Road Suite D. Orlando, FL 32811
3) Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addi (attach additional she		icles, enter change(s) here: (Be specific)	
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The date of each amendmen date this document was signed	(s) adoption:		, if other than the
Effective date if applicable:	08/26/2024		
	(no more than 90 days after amend	dment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory ne Department of State's records.	filing requirements, this date will	not be listed as the

(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.

Adoption of Amendment(s)

Dated	08/26/2024
	Jachanla Stephens
278	(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)
	LACHANDA STEPHENS
	LACHANDA STEFFILMS
	(Typed or printed name of person signing)