Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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H230001357523ABC

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To:	_		
	Division of Corporations		
	Fax Number	: (850)617-6380	
From:			
	Account Name	: CAPITOL SERVICES, INC.	
	Account Number	: I20160000017	
	Phone	: (855)498-5500	
	Fax Number	: (800)432-3622	
**Enter th	e email address	for this business entity to be used for future	
		gs. Enter only one email address please.**	
	•		
Ema1	l Address:		

## COR AMND/RESTATE/CORRECT OR O/D RESIGN LADYHAWKS FLORIDA, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	DA, INC.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted	ed for filing.
Please return all correspondence concerning this matter to	the following:
BRITTANY GARLAND	
(Na	ame of Contact Person)
	ame of Contact Person)
	(Firm/ Company)
248 MIRROR LAKÉ DRIVE N.	
	(Address)
ST. PETERSBURG, FL 33701	•
(Cir	ty/ State and Zip Code)
Brittanygarland006@gmail.com	
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please call	l:
BRITTANY GARLAND	813 7897331
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department of State:
(,	43.75 Filing Fee & —\$52.50 Filing Fee Certified Copy Additional copy is enclosed) — Certified Copy (Additional Copy is Enclosed)
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

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## Articles of Amendment to Articles of Incorporation of

LADYHAWKS FLORIDA, INC.		
(Name of Corporation as currently filed with the Florida	Dept. of State)	
N22000005745		
(Document Numb	per of Corporation (i	f known)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:	
		The new
name must be distinguishable and contain the word "corpord "Company" or "Co." may not be used in the name.	tion" or "incorpora	ted" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered offi new registered agent and/or the new registered office a		dn, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		(Florida street addræs)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and acce	ept the obligations of the position.
<u></u>	ignature of New Rev	ristered Agent, if changing

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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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sully Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address 3
1) Change Add	TD	WILL CONROY	248 MIRROR LAKE DRIVE ST. PETERSBURG, FL 33701
X Remove			
2) Change Add		_	
Remove Change Add Remove			
4) Change Add		<del></del>	
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
		onal Articles, enter change(s) here: essary). (Be specific)	
		A	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		<del></del>	***************************************

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The date of each amendment(s) addate this document was signed.	loption:	, it other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo locument's effective date on the De	ck does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
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.

	imbers or members entitled to vote on the amendment(s). The amendment(s) was/were pourd of directors.	:
Dated Signatu	04/11/2023 B B B B B B B B B B B B B B B B B B B	
· ·	(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)	s
	Brittany Bushway	
	President	
	(Title of person signing)	