## N23000006660

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SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: ISO/a Arts, Inc.
DOCUMENT NUMBER: 93 - 1711 420
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Katherine Larson
Katherine LATSON (Name of Contact Person)
Isola Arts Inc.
(Firm/ Company)
7955 92 ng Au
(Address)
Vero Beach, FC 32967
(City/ State and Zip Code)
divalarson@aoi.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person)  at $(772)$ 696 - 011 3  (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



October 18, 2023

KATHERINE LARSON 7955 92ND AVE VERO BEACH, FL 32967 US

SUBJECT: ISOLA ARTS INC. Ref. Number: N23000006660

We have received your document for ISOLA ARTS INC.. However, the document has not been filed and is being returned for the following:

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham Regulatory Specialist III Director's Office

Letter Number: 223A00024232

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Market Market Present Sile.

www.sunbiz.org

Division of Company in D.O. DOV 0207, Well-based Florida 2021

## Articles of Amendment to

Articles of Incorporation of

Isola	Arts INC.
(Name of Corporation as currently filed with the Florida  (Document Num	Dept. of State)  Ober of Corporation (if known)
·	ites, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	
JN //A	The new ation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	allon of incorporated of the dooreviation corp. of the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRES.	<u>s</u> ) /
	2023 N SECT
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	SEE
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florida, enter the name of the
Name of New Registered Agent:	N/A
New Registered Office Address:	(Florida street address)
New Registered Office Huntess.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	ed Agent:
	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: XChange XRemove XAdd	PT         John D           V         Mike Jo           SV         Sally S	ones .	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	D	Mary Lou Mullan	6306 446 Lane Vero Beach, EL 32968
Remove  2) — Change Add Remove	_D_	Aurera III. Gold Stein	0501 SWEED 24 T F1 BORN 250 34951 F2
Change Add			SSEE TO TO THE STATE OF THE STA
Remove 4) Change Add			AIE 10
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
	· · · · · · · · · · · · · · · · · · ·	NA	

- Martin -			
			<u> </u>
			\$EC
	<del> </del>		SECRETA PALLA
			V-1
			SSEE S
			D E TATE
The date of each amendment(s) adoption: date this document was signed.  Effective date if applicable:  (no more the	NA		, if other than the
Effective date if applicable:	NA		
<u>Note:</u> If the date inserted in this block does not meet document's effective date on the Department of State'		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)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.					
Dated <u>Sopt 15, 2023</u>					
Signature  (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)					
Katherine Larson					
(Typed or printed name of person signing) Fresideat					

(Title of person signing)

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