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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Crift	79	Sillers	C	om pania	n5,	Inc.
DOCUMENT NUMBER:							
The enclosed Articles of Amend	ment and fee are subir	nitted for	filing.				
Please return all correspondence	concerning this matter	r to the f	ollowing:				
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	760	<u> </u>	f Contact Person	<u> </u>	110	<del></del>	···
	Criff	es (Fire	Sitter n/Company)		m panio	<u> </u>	Inc
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For further information concerni	ng this matter, please	call:					
Orazie (Na	ook Boros		at	6 (sds)	18 362	631	5
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Enclosed is a check for the follo	wing amount made pay	yable to	the Florida Depa	irtment of	State:		1
X \$35 Filing Fee □\$	43.75 Filing Fee & [ Certificate of Status	Certifi	ed Copy ional copy is	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)		: : :
Mailing Addr Amendment S Division of Co P.O. Box 6327 Tallahassee, F	ection rporations		Amend Divisio The Ce 2415 N		orations Callahassee c Street, Suite 810	i.	

## Articles of Amendment

to

Critter Sitte	is Comminges. In	١૮.
(Name of Corporation as currently filed with the l	Florida Dept. of State)	
N240000 14839	1	
(Docume	nt Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For Profit Corporation adopts the	following
A. If amending name, enter the new name of the contain the word ' "Company" or "Co." may not be used in the name.	corporation:  Her Componions, Tw.  "corporation" or "incorporated" or the abbreviation "Corp." of	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be	<u>ox</u> )	
D. If amending the registered agent and/or registered new registered agent and/or the new registered  Name of New Registered Agent:	ered office address in Florida, enter the name of the i office address:	
<del>-</del>	(Florida street address)	
New Registered Office Address:		
	, Florida	• •
_	(City) (Zip Code)	
Now Books and Acoustic County of should be	atana di Arana.	S. 1
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	<u>pistered Agent:</u> I am familiar with and accept the obligations of the position.	
, Francisco		: :
<del></del>	Signature of New Registered Agent, if changing	<u>(,)</u>
	on the state of th	

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>V</u> <u>Mi</u>	hn Doc ike Jonés Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	<del></del>		
Remove			
2) Change Add			
Remove 3 ) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Is, if necessu	Articles, enter change(s) here: ry). (Be specific)	
			7.0 7.0 7.0
			<u> </u>

Effective date if applicable:  (no more than 90 days after amendme	nt file date)
The date of each amendment(s) adoption:date this document was signed.	, if other than the
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	; ; ;

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

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 March 2, 2025
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)
(Typed or printed name of person signing)
Office

(Title of person signing)