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| Special Instructions to Fil | ing Officer: | |
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Office Use Only



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SECRETARY OF STATE
TALLAMASSEE, FL

A SAC P

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATI | Our Place Brandon ON: | , Inc. | | | | | |
|------------------------------|---|--|---------------------|--|--------------|------------|----------|
| DACHBARNET SUISADED. | N29748 | | | | | | |
| DOCUMENT NUMBER: | | | | | | | |
| The enclosed Articles of An | nendment and fee are sub | omitted for filing. | | | | | |
| Please return all correspond | ence concerning this mat | ter to the following: | | | | | |
| Kevin Keene | | | | | | | |
| | | (Name of Contact I | Person) | | | | |
| Our Place Brandon, Inc. | | | | | | | |
| | <u> </u> | (Firm/ Compar | ny) | | | | |
| 1009 Lithia Pinecrest Road | I | | | | | | |
| - | | (Address) | <u> </u> | <u></u> | | | |
| Brandon, FL. 33511 | | | | | SEC | 2024 NOV 2 | |
| | | (City/ State and Zip | Code) | | | -Q | <u> </u> |
| ourplacebrandon@gmail.co | om | | | | AHAS AHAS | 2 | \$ 5°5 |
| | -mail address: (to be use | d for future annual re | eport notification | 1) | <u> </u> | -元- | |
| For further information con | cerning this matter, please | e call: | | | E FE | 3: 52 | 1,400 |
| Kevin Keene | | а | 954-850-3379 It | | ंग | 2 | |
| | (Name of Contact Person | ` | (Area Code) | (Daytime Tele | phone N | umber) | |
| Enclosed is a check for the | following amount made p | ayable to the Florida | Department of | State: | | | |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee Certified Copy (Additional copy enclosed) | Certif is Certif | O Filing Fee icate of Status ied Copy tional Copy is osed) | | | |
| Mailing A | Address | <u>s</u> | treet 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

| Our Place Brandon, Inc. | #11 1 = 1 | | |
|---|--------------------|------------------------------------|---------------------------------------|
| Name of Corporation as currently filed with the | e Florida D | ept. of State) | |
| N29748 | | | |
| (Docum | nent Numbe | er of Corporation (if known |) |
| ursuant to the provisions of section 617.1006, Flomendment(s) to its Articles of Incorporation: | rida Statutes | s, this <i>Florida Not For Pro</i> | ofit Corporation adopts the following |
| . If amending name, enter the new name of the | e corporati | on: | |
| | | | The nev |
| name must he distinguishable and contain the word Company" or "Co." may not be used in the name | l "corporati e. | ion" or "incorporated" or | the abbreviation "Corp." or "Inc." |
| 2. Enter new principal office address, if applica | ıble: | 1009 Lithia Pinecrest Roa | d |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | Brandon, FL 33511 | |
| | | | |
| C. Enter new mailing address, if applicable: | • | 1009 Lithia Pinecrest Roc | nd |
| (Mailing address MAY BE A POST OFFICE BOX) | | | . 2 |
| | | Brandon, FL. 33511 | 75EC 77 |
| | | | RE 1 |
| | | | 22 H.A. |
| If amending the registered agent and/or reginew registered agent and/or the new registered. | | | er the name of the |
| Kyle Dick | | te . | က်ကြသ ယ |
| Name of New Registered Agent: | 1009 Lithi | ia Pinecrest Road | 702 |
| | | (Florula . | street address) |
| New Registered Office Address: | Brandon | | |
| | _ | (City) | Florida (Zip Code) |
| | | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent | | | bligations of the position. |
| | | Hyle Der | |
| - | Sig | nature 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.

| <u>V</u> <u>Mike J</u> | ones | |
|------------------------|--------------------------------|--|
| <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| T | Kyle Dicke | 1009 Lithia Pinecrest Road Brandon, FL 33511 |
| <u>T</u> | Vincent Sardino | 1109 Lithia Pinecrest Road Brandon, FL, 33511 |
| | | |
| | | SECRE TALL |
| | | 22 22 27 20 30 44 77 30 44 77 30 77 30 77 40 70 70 70 70 70 70 70 70 70 70 70 70 70 |
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| | | |
| | Title T T ang additional Ar | Title Name T Kyle Dicke |

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| | |
| The date of each amendment(s) adoption: October 6, 2024 | , if other than th |
| date this document was signed. | |
| October 6, 2024 | |
| Effective date if applicable: (no more than 90 days after amendment fit | le date) |
| | |
| <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing r document's effective date on the Department of State's records. | equirements, 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)

Adoption of Amendment(s)

was/were sufficient for approval.

| | There are no membadopted by the boa | pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors. |
|--|-------------------------------------|---|
| | Dated | November 18. 2024 |
| | Signature | Avon C. Leeve |
| | · | 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) |
| | | Kevin Keene |
| | | (Typed or printed name of person signing) |
| | | Chair |
| | | (Title of person signing) |

2024 NOV 22 PH 3: 52 SECRETARY OF STATE