Paga 25422

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SECKLIARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: HOOD	DEPOT JUTE 025422	ERNATIONAL,	Inc.
The enclosed Articles of Amendment and fee are su	ibmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
MICHAEL HOOD DEPOT I	Name of Contact Person		_
HOOD HARDI I	Firm/ Company	il, the	
710 S. POWERL	INE Ad. SIE	= H	
710 S. POWERL	Rear H 7L 3	3442	_
100/-110-07	City/ State and Zip Cod	e	_
SVAL645 e He E-mail address: (to be u	OOD PEPOT, NI sed for future annual report	notification)	
For further information concerning this matter, plea	se call:		
MICHAEL LUBOWICKI		,570-9860	
Name of Contact Person	Area Co	de & Daytime Telephone Numl	per
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section		Address Iment Section	
Division of Corporations P.O. Box 6327		on of Corporations : Tentre of Tallahassee :	1024
Tallahassee, FL 32314	2415	N. Monroe Street, Suite 8105 assee, FL 32303	2024 HOV 18 PH I

Articles of Amendment to

Articles of Incorporation

ATTONAL, INC. (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street, address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the polyton. Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address 7
1) Change	CEO	DONALD LUBOWICK!	110 S. HOWEKINE KRAD
AddRemove			STEH DEFAFIELD BEACH, FL 33445
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			SS 222
6) Change			0
Add			SET P
Remove			
			I: 32

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
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//A	
/ / (1)	
	-
f an amendment provides for an exchange, reclassification, or cancellation of issued shares provisions for implementing the amendment if not contained in the amendment itself:	د
(if not applicable, indicate N/A)	
	•
NH.	
	<u> </u>
	SECTLA FOY
	VA.
	OV 8 PM :
•	STA STA
	l: 32 TATE FL

The date of each amendment(s) ad date this document was signed.	option: Movember 12th, 2024 if 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 bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	<u> </u>
	(voting group)
selected	MULTIPUTE A CONTROL OF THE PROPERTY OF THE PRO
	Samantha Lub() WICKI (Typed or printed name of person signing)
	(Title of person signing)