## P00 0000 45912

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	<b>→</b> #)
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

		, , —	
NAME OF CORPOR	ATION:59	Kia, Inc	
DOCUMENT NUMB	ER:	00000 45 912	
	of Amendment and fee are su		
Please return all corresp	condence concerning this ma	itter to the following:	
	M	ary E. Prad	or CPA
-	<u> </u>	Name of Contact Perso	on .
	M	Firm/Company	os CPA PA
-	8740	Firm/ Company  N F 2 ~ 4	Avenje
-	EL P	Firm/ Company  NE 2 ~ 4  Address  2 + 4   F    City/ State and Zip Cod	33138
_		City/ State and Zip Cod	le
		p cpa e a ol	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas		
Mary	E. Prados	at (305	de & Daytime Telephone Number
Name' of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
□ \$35 Filing Fee	☑\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Amen Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 assec, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment** to

## Articles of Incorporation of Sykia, Inc (Name of Corporation as currently filed with the Florida Dept. of State)

P000000 45 912

(Document Number of Corporation (if known)

ent(s) to

	the corporation:	
name must be distinguishable and contain the wo "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	rd "corporation," "company," or "incorporated" or the abb "Inc," or "Co". A professional corporation name must abbreviation "P.A."	The nev reviation "Corp., contain the work
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET	icable: [ADDRESS]	<del></del>
		73.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)	
D. If amending the registered agent and/or re- new registered agent and/or the new registered	gistered office address in Florida, enter the name of the ered office address:	20,
Name of New Registered Agent		
	(Florida street address)	
	,	
New Revistered Office Address	, Florida	(Zip Code)
New Registered Office Address:	(City)	•

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)

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	<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>	<u>Name</u>	Address
1) Change	_P_	Angelo Marinos	Davie, FL 3302
Add		,	Davie, FL 3302
Remove  2) Change		Erangelia Marinis	6690 Stirling Rona
Add			Davic, FL 33024
Remove 3) Change	<del></del>		
Add			
Remove			<del></del>
4) Change			
Remove		-	
5) Change			
<b>A</b> dd			
Remove		_	
6) Change			
<b>A</b> dd		-	
Remove			

(Attach additiona	adding additional Articles, eal sheets, if necessary). (Be:	specific)		
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If an amendmen	t provider for up analysis			
provisions for i	t provides for an exchange, i mplementing the amendmen	t if not contained in the	se amondment itsued sha	res,
(if not appli	cable, indicate N/A)	t ii not contained in ti	re amendment usen;	
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The date of each amendment(s) adoption:date this document was signed.	July 29, 2020	, if other than the
Effective date if applicable:	11/4 29 2020	
in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does r document's effective date on the Department o	not meet the applicable statutory filing requirements, this dat f State's records.	e will not be listed as the
Adoption of Amendment(s) (CF	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	incorporators, or board of directors without shareholder actio	n and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s approval.	.)
must be separately provided for each voting	te shareholders through voting groups. The following stateme g group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the apie	ndment(s) was/were sufficient for approval	
by(vol	(ing group)	
Dated	29/2020	
(By a director, pres	ident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court by that fiduciary)	
	Evagelia Marines (Typed or printed name of person signing)	
	President	
(	Title of person signing)	