## PDDDDD0045954

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## COVER LETTER

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**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION:				
DOCUMENT NUME	BER: 1000000 45954	l			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Charles T Best Jr				
		Name of Contact Person	n		
	Twiggy's Inc				
		Firm/ Company			
	5224 West State Rd # 143				
	Address				
	Sanford, FL 32771				
		City/ State and Zip Cod	c		
•••••					
	ysinc@gmail.com	sed for future annual report	mutitiontium		
	n-mail address. (a) be u	sed for furthe annual report	liouncation)		
For further information	a concerning this matter, plea	se call:			
Charles Best		at (	) 538-4008		
Name o	of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	utment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O.	ling Address indment Section sion of Corporations Box 6327 ahassee, FL 32314	<u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles	of Amendment
	of Amendment to FILED of Incorporation of 2018 DEC -5 AH 10: 48
Articles o	of Incorporation
	of 20/RDED
Twiggy's Inc	- ULC -5 AMID
(Name of Corporation as cur)	rently filed with the Florida Dept. of State)
PU0000045954	
(Document Numł	ber of Corporation (if known) $(t, t_{i})$
Pursuant to the provisions of section 607.1006, Florida Statutes, ts Articles of Incorporation:	, this Florida Profit Corporation adopts the following amen
A. If amending name, enter the new name of the corporation	<u>n:</u>
n/a	The
"Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." word "chartered," "professional association," or the abbreviat	
R Enter new principal office address, if applicable:	400 Sandpiper Lane
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	400 Sandpiper Lane
(Principal office address <u>MUST BE A STREET ADDRESS</u> ) C. <u>Enter new mailing address, if applicable:</u>	400 Sandpiper Lane Osteen, FL 32764
(Principal office address <u>MUST BE A STREET ADDRESS</u> ) C. <u>Enter new mailing address, if applicable:</u>	400 Sandpiper Lane Osteen, FL 32764 5224 West State Road 46
(Principal office address <u>MUST BE A STREET ADDRESS</u> ) C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	400 Sandpiper Lane Osteen, FL 32764 5224 West State Road 46 Unit # 143 Sanford, FL 32771
(Principal office address <u>MUST BE A STREET ADDRESS</u> ) C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> ) D. <u>If amending the registered agent and/or registered office</u>	400 Sandpiper Lane Osteen, FL 32764 5224 West State Road 46 Unit # 143 Sanford, FL 32771
<ul> <li>(Principal office address <u>MUST BE A STREET ADDRESS</u>)</li> <li>C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)</li> <li>D. <u>If amending the registered agent and/or registered office</u> <u>new registered agent and/or the new registered office add</u></li> <li><u>Name of New Registered Agent</u></li> </ul>	400 Sandpiper Lane Osteen, FL 32764 5224 West State Road 46 Unit # 143 Sanford, FL 32771
D. <u>If amending the registered agent and/or registered office</u> <u>new registered agent and/or the new registered office add</u> <u>Name of New Registered Agent</u> <u>(Floria</u>	400 Sandpiper Lane Osteen, FL 32764 5224 West State Road 46 Unit # 143 Sanford, FL 32771 • address in Florida, enter the name of the dress:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

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>T4</u> John Doc  $\underline{V}$ Mike Jones X Remove Sally Smith <u>X</u> Add ŞV Type of Action Title <u>Name</u> Address (Check One) 400 Sandpiper Lane S Lou Ann Best 1) X Change Osteen, FL 32746 Add \_ Remove Charles T Best Jr 505 Burton Lane Р 2)  $\xrightarrow{X}$  Change Sanford, FL 32771 Add \_\_\_\_\_ Remove Lalainia Miller 303 Vihlen Rd v  $3) \xrightarrow{X}$  Change Sanford, FL 32771 \_\_\_\_ Add \_\_ Remove 4) \_\_\_\_ Change Add Remove 5) \_\_\_\_ Change \_\_\_ Add Remove 6) \_\_\_\_ Change Add \_\_\_\_ Remove

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

\_\_\_\_

Oct 1, 2018	
The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Oct 1, 2018 Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will i document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
□ The amendment(s) was/were approved by the shareholders through voting groups. <i>The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):</i>	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
November 30, 2018 Dated	
i for the set	
Signature / Con Col	
By a director, president or other officer - if directors or officers have not been	-
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Charles T Best Jr	

(Typed or printed name of person signing)

President

(Title of person signing)