P000000 54178

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	AATION: Planned Perfection	ı, Inc.			
DOCUMENT NUME	P0000005.1178				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Edmund Russo				
	· ···························· ········	Name of Contact Persor	1		
	Planned Perfection, Inc.				
		Firm/ Company			
	10970 S. Cleveland Avenue Suite 601				
	 .	Address			
	Fort Myers, Fl. 33907				
		City/ State and Zip Code	2		
	edrusso@somethingbloomed	lswfl com			
	E-mail address: (to be used for future annual report notification)				
			,		
For further information	concerning this matter, pleas	se call:			
Ed Russo		at (239	989-2792		
Name o	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 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 Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Section n of Corporations entre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

of

Planned Perfection, Inc.			
(Name)	of Corporation as current	ly filed with the Florida Dept. of State)	<u> </u>
P00000054178			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
	.orp," "Inc." or "Co"	company," or "incorporated" or the abbrevia A professional corporation name must cont 	tion "Corp.,"
B. Enter new principal office address,	if annlicable:	12660 Metro Parkway	
(Principal office address MUST BE A STREET ADDRESS)		Ft. Myers, Ft. 33966	53
			·
C. Enter new mailing address, if appl			5
(Mailing address MAY BE A POST)	<u>OFFICE BOX</u>)		
			·-
D. If amending the registered agent ar new registered agent and/or the new			
	Ed Russo	2-	
Name of New Registered Agent			<u> </u>
	12660 Metro Parkway		
	(Florida st	rvet address)	_
New Registered Office Address:	Ft. Myers,	, Florida	·
		(City) (Zi	p Code)
New Registered Agent's Signature, if c		t: with and accept the obligations of the position	1
The state of the s	8	was the constant of the parties	••
2/	/X <i>/</i>		
Col	4		
	Signature of New F	Registered Agent, if changing	

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	PT	<u>John Do</u>	<u>c</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jor	nes	
X Add	<u>SV</u>	Sally Sm	nith_	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) X Change	PSTD	_	Edmund Russo	3934 Arlington
Add				Ft. Myers. Fl. 33901
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

L. <u>II ame</u> (Attach	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
N/A	
: Ifon a	mands and manufactures are as shown as an electrical and as a second shown
provi	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself:
() N/A	f not applicable, indicate N/A)
N/A	
·	
	

•

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
_ 	ino more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendmes sufficient for approval.	ent(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
, <u> </u>	(voting group)	
August Dated	5. 2020 	
sele	a director, president or other officer – if directors or officers have not be cted, by an incorporator – if in the hands of a receiver, trustee, or other cointed fiduciary by that fiduciary)	
	Edmund Russo	
	(Typed or printed name of person signing)	
	PSTD	
	(Title of person signing)	