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A RAMSEY

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations PATER ENTERPRISES, INC. NAME OF CORPORATION: DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person CNIESPRISES Firm/ Company used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation

FILED

	of 2021 AUG 31 2
	KOBBIES CHARTER ENTERPRISES PHIRNOD
(Name of Cor	rporation as currently filed with the Florida Dept. of State 1 35 3735-
	P01000048241
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation adopts the following amendm
A. If amending name, enter the new name o	of the corporation:
	The nev
name must be distinguishable and contain the w. "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	vord "corporation." "company," or "incorporated" or the abbreviation "Corp., "Inc," or "Co". A professional corporation name must contain the work
B. Enter new principal office address, if app (Principal office address MUST BE A STREE	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E E BOX
new registered agent and/or the new regis	registered office address in Florida, enter the name of the stered office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
New Registered Office Address.	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing thereby accept the appointment as registered as	ng Registered Agent: gent. I am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing
Check if applicable ☐ The amendment(s) is/are being filed pursuant	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, n 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; CEC Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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. 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 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
1) Change	VP_	KEBECCA KITIER	11522 OVERSEAS The
Add			ISLAMURADA, FL 3303
Remove		_ 1)	
2) Change	VP	JONATHAN M. KECKWERDT	11522 //YERSENS Huy
Add			ISTAMORADA, FL 330
Remove 3) Change	VP	TIMOTHS SANVEDRA	11522 DVERSINS /
Add			IS/MORADA, FL 3303
Remove			
4) Change			
Add			
Remove			
5) Change Add			
Add			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
			 		
	 				
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fan amendmant n	covidae for an arabana			. 61	
provisions for imp	ovides for an exchange lementing the amendm	ent if not contain	<u>, or cancenation</u> ned in the amend:	or issued snares,	
(if not applicab	le, indicate N/A)		ace in the amend	inchi itacii.	
					
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The date of each amendment(s) adoption: Effective date if applicable: (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 not be listed document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. 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. The following statement must be separately provided for 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	Effective date if applicable: (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 document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE)	
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Signature Signature Signa	☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
Signature Anatha Provonts (Ps 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) JONATHAN RECKUERDT (Typed or printed name of person signing)	"The number of votes cast for the amendment(s) was/were sufficient for approval	
Signature Signature South Provent		
Signature (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) Touth Had Reckwerst (Typed or printed name of person signing)	(voting group)	
(Py 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) TONATHAN HECKWERNT	Dated	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) TONAL HAD HECKWERDT (Typed or printed name of person signing)	Signature Longotton Moborett	
appointed fiduciary by that fiduciary) JONST HAN HECKWERDT (Typed or printed name of person signing)	(By a director, president or other officer - if directors or officers have not been	_
(Typed or printed name of person signing) VP	appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	To the way Daguer and	
VP	(Typed or printed name of person signing)	
(Title of person signing)	.10	
	(Title of secretaria)	