## PO20000 17299

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JUN 25 2020 S. YOUNG

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	TION:	CROWNED EAGLE P			
DOCUMENT NUMBEI	P02000017299				
	Amendment and fee are su	bmitted for filing			
•		·			
Please return all correspo	ndence concerning this ma	tter to the following:			
	N	MICHELLE PEREZ-MACI	AS		
	Name of Contact Person				
	MACIAS CONSULTING INC  Firm/ Company				
	1625 SE 46TH ST, STE 5A				
	Address				
	CAPE CORAL, FL 33904				
		City/ State and Zip Cod			
		IELLE@MACIASWEISSA			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information c	oncerning this matter, plea	se call:			
MICHELLE PER	REZ-MACIAS	at ( 230	549-2140		
	REZ-MACIAS Contact Person	at ( 239 Area Co	de & Daytime Telephone Number		
Name of C	Contact Person		de & Daytime Telephone Number		
Name of C	Contact Person	Area Co	de & Daytime Telephone Number		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

CROWNED EAGLE PUBLSISHING INC

(Name of Corporation as cu	rrently filed with the F	lorida Dept. of State)	
P02000017299			
(Document Nun	nber of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida Statutes ts Articles of Incorporation:	s, this <i>Flo<b>rida Profit Co</b>i</i>	rporation adopts the following	ing amendment(
A. If amending name, enter the new name of the corporation	on:		
STERAFOX INC			The new
ame must be distinguishable and contain the word "corporatio" Inc.," or Co.," or the designation "Corp," "Inc," or "Cochartered," "professional association," or the abbreviation	o". A professional coi	orporated" or the abbreviat poration name must conta	ion "Com "
B. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS.)			<del></del>
	<del></del>	**	
		** ***********************************	
Enternance mailing and the state			2 mars 1
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		# 1 () 17 () 57	00
	<del></del>	المراجعة الم	F part
	<del> </del>	<u> </u>	<del>- a</del>
			्य स
If amonding the registered agent and/	3.1		<del></del>
<ul> <li>If amending the registered agent and/or registered office new registered agent and/or the new registered office ad</li> </ul>	<u>e address in Florida, en</u> Idress:	ter the name of the	
V CN D L			
Name of New Registered Agent			_
			_
(Flori	ida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip	Code)
ew Registered Agent's Signature, if changing Registered A	l acout.		
hereby accept the appointment as registered agent. I am fami	iliar with and accept the	obligations of the position.	
		,	
-			_
Signature of N	lew Registered Agent, if o	changing	
heck if applicable			
The amendment(s) is/are being filed pursuant to s. 607.0120	(11) (e) FS		

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					
Add					
Remove					
2) Change					
Add					
Remove 3 ) Change					
Add					
Remove					
4) Change	···		<del></del>		
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
	<del></del>
<del> </del>	
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date if applicable:	JUNE 05, 2020	
	(no more than 90 days after amendment file da	ie)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement and state's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without share	eholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were se	opted by the shareholders. The number of votes cast for the a afficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
,	(voting group)	
Dated ILINE (	05, 2020	
DatedJUNE (	50 al	
(By a d	irector, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, of the fiduciary by that fiduciary)	
	STEVEN MAHER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	