## Pozoco47009

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FILED 2023 OCT -2 AHII: 16 SECRETARY OF STAR

## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: TALA GEOUP INC
DOCUMENT NUMBER: P0200047009
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAMES MCCIORE  Name of Contact Person
MLA GREOP INC.
Firm/ Company
401 E. LAS OLAS BLYO, B-130 # 427 Address
FLANDERDALE, FZ. 3330
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
<u></u>
For further information concerning this matter, please call:
SAMES MCCIORE at (954) 650 310)
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)

**Mailing Address** 

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Max

## Articles of Amendment Articles of Incorporation

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of State)		سک

(Name of Corporation as curren Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. 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 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.

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>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		<u> </u>	
Add			
Remove 3) Change			
Add			
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4) Change			
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5) Change			
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6) Change			
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	neets, if necessary).	(Be specific)				
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n amendment r	rovides for an exch	ange, reclassifica	tion, or cancella	tion of issued sha	ares.	
ovisions for imp	olementing the amei	ndment if not con	tained in the an	nendment itself:		
(if not applicat	ble, indicate N/A)					
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The date of each amendment(s) adoption:	, if other than the
<u>-</u>	
Effective date <u>if applicable</u> : (no more than 90 day	rs after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board action was not required.	of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The nun by the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	fficient for approval
by(voting group)	
(voting group)	
Signature Arres G  (By a director, president or other officer –	if directors or officers have not been
selected, by an incorporator – if in the har appointed fiduciary by that fiduciary)	ds of a receiver, trustee, or other court
Typed or printed name	2E
(Typed or printed name	or berson signing)
(Title of person signing	