# POZ 000 111804

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FILED 2022 FEB - 2 PH 1: 30 SECRETARY OF STATE

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#### **COVER LETTER**

<u> </u>				
TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: Kathryn's Collection Inc.				
DOCUMENT NUMBER: P02006 111804				
The enclosed Articles of Amendment and fee are submitted for filling.				
Please return all correspondence concerning this matter to the following:				
Kathryn Cumming Name of Contact Person  Kathryn's Collection Inc.  Firm/ Company  2355 Vanderbilt Beach Rd Stute 126  Address  Naples F 34109  City/ State and Zip Code  & Support & Kathryn's Collection, Com  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Kathryn Cumming at (239) 434-1885  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:				
\$35 Filing Fee S43.75 Filing Fee S43.75 Filing Fee Sertificate of Status Certificate of Status (Additional copy is enclosed)  \$35 Filing Fee S43.75 Filing Fee Sertified Copy Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations				

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

#### Articles of Amendment

to

## Articles of Incorporation of

FILED

Kathryns Cellection 1	1C:
(Name of Corporation as currently	1022 FEB -2 PH 1: 36
P02000111804	SECRETARY OF STATE TALLAHASSEE, FL
(Document Number of	Corporation (if known) IALLAHASSEE, FL
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "co	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	n/a
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	nla
D. If amending the registered agent and/or registered office address:  Name of New Registered Agent  Name of New Registered Agent	·
New Registered Office Address: Naples	e Cumming  bilt Beach Rd Suite 126  et address)  Florida 34109  (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wi  Signature of New Reg	ith and accept the obligations of the position.  Stered Agent, if changing
Check if applicable  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e.	) a ES

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)

\_ Add

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 Mike Jones X Add SVSally Smith Type of Action Title Name **Address** (Check One) 1) \_\_\_\_ Change \_\_\_ Add Remove 2) \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove 3 ) \_\_\_\_ Change \_\_\_\_ Add \_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_ Remove 5) \_\_\_\_ Change Add \_ Remove 6) \_\_\_\_\_ Change

tach additional sheets, if necessary).	rticles, enter change(s) here: (Be specific)
n (c)	
·	
<u>ovisions for implementing the am</u>	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
n a	į

The date of each amendment(s) add	experience $2/1/22$	if other than the
date this document was signed.		· otter than the
Effective date <u>if applicable:</u>	1/1/21	
<u>i wppicasię.</u>	(no more than 90 days afte	r amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statut artment of State's records.	tory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of di	rectors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of icient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were appromust he separately provided for ea	oved by the shareholders through voting sich voting group entitled to vote separa	g groups. The following statement ately on the amendment(s):
"The number of votes cast fo	r the amendment(s) was/were sufficien	u for approval
by		**
	(voting group)	<del></del> -
Dated_ 2/i/	22	
Signature	Kathryn B.	Cumpuz
	ctor, president or other officer - if dire	
	by an incorporator — if in the hands of a I fiduciary by that fiduciary)	a receiver, trustee, or other court
	Kathryn B. Cum (Typed or printed name of pe	mino
		rson signing)
	President	
	(Title of person signing)	