P03000038661

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: ____ DEGEN'S PIANO, INC DOCUMENT NUMBER: P03000038661 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ELIAN DEGEN Name of Contact Person DEGEN'S PIANO, INC Firm/ Company 1314 E LAS OLAS BLVD#1653 Address FORT LAUDERDALE FL 33301 City/ State and Zip Code eceus pland. Com
o be used for future annual report notification) For further information concerning this matter, please call: at (954) 614-3453

Area Code & Daytime Telephone Number **ELIAN DEGENS** 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 & □543.75 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
Amendment Section
Division of Corporations
P.O. Box 6327

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment

Articles of Incorporation of

DEGEN'S PIAND, INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P03000038661	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ing amendment(s) to
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 abbrevia "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contributed," "professional association," or the abbreviation "P.A."	tion "Corp.," ain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1314 E LAS OLAS BLVD#1653	
FORT LAUDERDALE, FL 33301	
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 N/A	_
(Florida strevi address)	_
New Registered Office Address: Florida (City) (Zi	p Coder
·	
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	ı. po ***
$\lambda)/\Delta$	<u> </u>
Signature of New Registered Agent, if changing	— <u>~</u>
	· · · · · · · · · · · · · · · · · · ·
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	æ
	<u></u>

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	<u>PT</u>	John Doe	
\underline{X} Remove	Y	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PD	ELIAN DEGEN	1314 E LAS OLAS BLVD#1653
X Add			FORT LAUDERDALE, FL 33301
X Remove			22464 SW 89TH, PATH
Change		_	CUTLER BAY, FL 33190
Add			
Remove 3) X Change	VP	ADRIANA CANELON-DEGEN	1314 E LAS OLAS BLVD#1653 FORT LAUDERDALE, FL 33301
Add			on
X Remove			22464 SW 89TH, PATH
4) Change			CUTLER BAY, FL 33190
Add			
Remove			
5) Change			
Add			
Remove			
δ)Change			
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	:les, enter change(s) here: - (Be specific)
THE AMENDING CHANGE ADDRESS	
· · · · · · · · · · · · · · · · · · ·	
11 . 010	
F. If an amendment provides for an excha	inge, reclassification, or cancellation of issued shares,
provisions for implementing the amen	dment if not contained in the amendment itself;
(if not applicable, indicate N/A)	
-	

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06/14/2021
The date of each amendment(s) adoption:, if other than the date this document was signed.
06/14/2021 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 as the 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 PD AND VP
(voting group)
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)
ELIAN DEGEN
(Typed or printed name of person signing)