## PC30000 39728

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200344573152

05/18/20--01017--015 +\*35.00

(129 HE) 18 PH 6: 41

3000 8 0 NUL

## **COVER LETTER**

Amendment Section

TO:

Division of Corporations
SUBJECT: Enightened Designs Inc. Name of Corporation J
DOCUMENT NUMBER: 405000 3917
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Desire Gray Name of Contact Person  Enlightened Designs, Inc  Firm/Company  2829 W Birds Nest Orive  Address  Levely Hills, Fr 34405  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jessie Gray 352, 362-4558
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: 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

CR2E045 (04/13)

## Articles of Amendment

to

## Articles of Incorporation

of

to

Enlightned Designs I	273 MAY 18 PH 6: 44
P03000039728	rida Dept. of State)
(Document Number of Corporation (if kn	own)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corp</i> its Articles of Incorporation:	coration adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "inco "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corp "chartered," "professional association," or the abbreviation "P.A."	rporated" or the abbreviation "Corp., poration name must contain the word
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, entered registered agent and/or the new registered office address:	ter the name of the
Name of New Registered Agent	
(Florida street address)	
(r tortua street daaress)	
New Registered Office Address: (City)	, Florida (Zip Code)
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.	

			and name of each offic	cer/director being removed and title, name, and	l
address of each Offic		• •			
(Attach additional she	-	•	or	•	
75		le by the first letter of the of	=	$= T_{\text{months}} C = Chairman on Cloubs (CEO) = Chia$	j.
				= Trustee; C = Chairman or Clerk; CEO = Chie than Society Vise the first large of each office held	
President, Treasurer,	O = Cniej i Director wo	inanciai Ojjicer, ij un ojjic add ho PTD	erranetin nonas mine i	than o <mark>ne title flist the first l</mark> etter of each office held.	
Changes should be no a change, Mike Jones	ited in the fo leaves the c	llowing manner. Currently		the PST and Mike Jones is listed as the V. There is use should be noted as John Doe, PT as a Change	
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	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
(Check One)	7	<i>C</i> <b>v</b>		0	
1) X Change		<u>Jherce A</u>	Lansing	2029 W. Birds Next Ur	
			$\mathcal{J}$	2829 W. Birds Next Or Beneriu Hills Fl 24465	

\_\_\_\_ Add \_\_\_\_ Remove 2) L Change \_\_\_\_ Add Remove 3) Change \_\_\_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 5) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 6) \_\_\_\_ Change \_\_\_\_ Add

\_\_\_\_ Remove

ttach additional sheets, if necessary). (Be specific)	·	
		_
	2020 MAY 18 PM 6: 44	
	· · ·	
	<u> </u>	
<del></del>		
	<del></del>	<u>.</u>
an amendment provides for an exchange, reclassification	on, or cancellation of issued shares,	
orovisions for implementing the amendment if not conta (if not applicable, indicate N/A)	ined in the amendment itself:	
s (Λ_		
<u> </u>		

	3/1/2020	Se rate in attention the
The date of each amendment(s) adoption: date this document was signed.	3)1/0000	, if other than the
Effective date if applicable:	3/1/2020	Annual Ella Lata
Note: If the date inserted in this block does document's effective date on the Department	(no more than 90 days after amen s not meet the applicable statutory fil of State's records.	2020 HAT IS GATE WAIL OF the listed as the
Adoption of Amendment(s)	CHECK ONE)	•
☐ The amendment(s) was/were adopted by t action was not required.	he incorporators, or board of directors	without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient f		east for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each vot		•
"The number of votes cast for the ar	mendment(s) was/were sufficient for a	pproval
by		"
(	voting group)	
Dated 5/14/267	0 H Farry	-
selected, by an i	resident or other officer—if directors on neorporator—if in the hands of a receinary by that fiduciary)	
_Fr	ed H Lansing (Typed or printed name of person si	gning)
Pr	esident (Tith of autom cinning)	
	(Title of person signing)	