P03000107463

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SOUTH M	ANHATTAN INVESTMENTS INC
DOCUMENT NUMBER: PO3000	107463
The enclosed Articles of Amendment and fee are so	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
PJ's Manag	Piper Palori Name of Contact Person ement Firm/ Company
4145 Hender	son Blvd.
Tampa, FL	Address . 33429 City/ State and Zip Code o er 0502(a) a mai/. com used for future annual report hotification)
For further information concerning this matter, plea	ase call:
Jillian Piper Palori Name of Contact Person	at (270) 791-5408 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) Catalogue Certificate of Status (Additional Copy is enclosed)
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

Articles of Amendment Articles of Incorporation

to

	TMENTS INC.
(Name of Corporation as current)	y filed with the Florida Dept. of State)
P0300010746	3
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N A
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 add	
new registered agent and/or the new registered office address	<u> </u>
Name of New Registered Agent Pete Antho	ony Palori III Har To D
4145 Henderson	n Blvd. Tampa, FL 3362 &
New Registered Office Address: N/A	(City), Florida N/A (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar Signature of New F	with and accept the obligations of the position. V 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)

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	PT John D	<u>oc</u>	
X Remove	V Mike J	ones	
X Add	SV Sally S	<u>imith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	_D_	Pete A Palori Jr.	4145 Henderson Blvd Tampa, FL 33629
X Remove	DP	Pete Anthony Palori III	4145 Henderson Blvd Tampa, FL 33629
Remove 3) Remove Add	<u></u>	Jillian Piper Palori	4145 Henderson Blvd Tampa, FL 33629
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N A	(Attach	additional sheets, if nece			
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	see	attached	corporate	consent.	
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N/H	provis (i	sions for implementing f not applicable, indicate	the amendment if not conta	on, or cancellation of issued share including the amendment itself:	<u>.s.</u>
	/	V.I.R			
			 		
		 			
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The date of each amendment(s) add date this document was signed.	option: 8/19/2021	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirement of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopt action was not required.	oted by the incorporators, or board of directors without sha	reholder action and shareholder
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the ficient for approval.	amendment(s)
	oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amend	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	,,,	
	(voting group)	
Signature(By a dir selected	ector, president or other officer – if directors or officers ha by an incorporator – if in the hands of a receiver, trustee, and fiduciary by that fiduciary)	
-	Pete A. Palori TT (Typed or printed name of person signing)	
	DP	
_	(Title of person signing)	