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SEGRETARY OF STATE

4 2/17/2022

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee 35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address **Amendment Section** Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Taliahassee, FL 32303

Articles of Amendment to Articles of Incorporation

FILED

Articles of Inc	corporation
or Tours	2022 FEB -8 AM II: 18
(Name of Corporation as current)	y filed with the Florida Dept. of State) Lina 1 Ur STATE
D6110000 1.110	TALL AHASSEE, FL
(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) to
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporation," "or "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.,"
thanterea, projessional association, of the above ration 1.7.	MULLI Various Var Ob
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	of 1999 Vary cog Vere
(1 method office doubless proper the A District And	Spring Hill, FL
	34608
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ayuy Vancouver Rd
(<u></u>	(0-2°06 H) H TI
	Spring milke
	34608
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent	arelle (ASO)
Nume of New Registered Rectil	CALLIA HANGOLIE-RO
(Florida str	eet address)
Sociality	F1 291.08
New Registered Office Address:	(City), Florida (Zip Code)
•	1-4
New Registered Agent's Signature, if changing Registered Agent:	:
I hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
(Au	en I (les
Signature of New Ri	egistered 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	5	Danielle LASO	9444 Vancouver Rd
Add			Spring Hill FL
Remove 2) Change	$\frac{\checkmark}{}$	Diane Bushey	136 ParadisE Blu
Add			Tons Hive
Remove Change			<u>0</u> 8757
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ach additional sheets, if necessa	. 1 0
	NIX
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amendment provides for an	exchange, reclassification, or cancellation of issued shares,
visions for implementing the	e amendment if not contained in the amendment itself:
(if not applicable, indicate N/2	(A)
	NID
	10/1/

The date of each amendment(s) as	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendation flicient for approval.	nent(s)
	roved by the shareholders through voting groups. The following st 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		
	(voting group)	
Dated	125/22	
Signature	1 Kreed ()	
(By a di	rector, president or other officer - if directors or officers have not	
	 f, by an incorporator – if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary) 	court
	Danielle CASO	
	(Typed or printed name of person signing)	
	president	
	(Title of person signing)	