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ST SHEET

COVER LETTER

NAME OF CORPORATION: A DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee **□\$**43.75 Filing Fee &

> Certified Copy (Additional copy is

enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327

Certificate of Status

Street Address

Amendment Section
Division of Corporations
Clifton Building

Certificate of Status

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment

Articles of Incorporation

	of		
T0500/ L. 54	andriduo_Too		
(Name of Corporation as curren	itly filed with the Florida Dept. of State)		
DITHIT	110101012		
(Document Number	of Corporation (if known)		
Decree of the control	Fluid Puff Community adopts the fellow	wina amandr	mant(a) to
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is riorida rroju Corporation adopts the totto	wing amenun	nem(s) te
A. If amending name, enter the new name of the corporation:			
		The ne	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name ma	2 abbreviatio 4st contain th	on he
B. Enter new principal office address, if applicable:		2	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		1 <u>7</u> 23 16 1	
		C	
			- (,-,-,
C. Enter new mailing address, if applicable:		·· —	•
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u> </u>	
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			-
D. If amending the registered agent and/or registered office ad			
new registered agent and/or the new registered office addre	ss:		
Name of New Registered Agent			
(Florida :	street address)		
No. Design and CMD at the con-	. Florida		
New Registered Office Address;		Zip Code)	-
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>		
I hereby accept the appointment as registered agent. I am familia.	r with and accept the obligations of the position	n.	
Signature of New	Registered Agent, if changing		

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)

Remove

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.

Mike Jones, V as Remove, and Sally Smith, SV as an Add. Example: X Change <u>PT</u> John Doe X Remove $\underline{\mathbf{v}}$ Mike Jones X Add <u>SV</u> Sally Smith Type of Action <u>Title</u> Address <u>Name</u> (Check One) MISS DOW MOUDDUTEL Jeforo Corritos 1) ____ Change X Add _ Remove 2) ____ Change Add Remove 3) ____ Change ____ Add __ Remove 4) ____ Change Add __ Remove 5) ____ Change ___ Add _ Remove 6) ____ Change Add

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Done and.
(UP) VICO Prosidont: Jefone Corritos
7135 Dar Marke Trl
Latoland FL 33810
<u> </u>

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F. 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)

The date of each amendment(s) adoption: $\underline{September 20,200}$, if other than the date this document was signed.
Effective date if applicable: 5000000000000000000000000000000000000
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 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
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 9-26-19
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)
Taseph L Standlids (Typed or printed name of person signing)
Res.
(Title of person signing)