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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Bear Hugs Cogswo	ell, Inc.		
DOCUMENT NU	imber: P05000078994			
	cles of Amendment and fee are su	bmitted for filing.		
Please return all co	orrespondence concerning this ma	tter to the following:		
	Ganon J. Studenberg, Esq.			
		Name of Contact Perso	n	
	Studenberg Law			
	Firm/ Company			
	1119 Palmetto Avenue			
		Address		
	Melbourne, Florida 32901			
		City/ State and Zip Cod	le	
	lcd2719@hotmail.com			
	E-mail address: (to be us	sed for future annual report	t notification)	
For further inform	ation concerning this matter, plea	se call:		0 2
Ganon J. Studenb	erg	at (321) 722-2420 ode & Daytime Telephone Number	7:1
Na	me of Contact Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a chec	ck for the following amount made	payable to the Florida Dep	partment of State:	. :
S35 Filing Fe	e □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	三二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amen Divisi The C 2415	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 assee, F1, 32303	

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	on as currently filed with the Florida Dept. of State)	
Bear Hugs Cogswell, Inc.		
(Docun	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment	(s) to
A. If amending name, enter the new name of the co	orporation: The new	
name must be distinguishable and contain the word "co" lnc.," or Co.," or the designation "Corp," "Inc.," chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word	
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADL</u>	<u>DRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>		
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:	: :, !
Name of New Registered Agent	·	i. <u> </u>
	(Florida street address)	9: 1
New Registered Office Address:	(City) . Florida (Zip Code)	σ,
New Registered Agent's Signature, if changing Reg Thereby accept the appointment as registered agent.	vistered Agent: I am familiar with and accept the obligations of the position.	
Sign	nature of New Registered Agent, if changing	
Check if applicable		

 \square 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:

 $P \neq President; V \neq Vice President; T \in Treasurer; S \mid Secretary; D \mid Director; TR \vdash Trustee; C \neq Chairman or Clerk; CEO + Chief Executive Officer; CFO | Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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.

\underline{X} Change	<u>PT</u> <u>John</u>	<u>i Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	D,P,S,T	Barry J. Lang	3000 South Fiske Blvd.
Add			Rockledge, Florida 32955
Remove 2) X Change	D, VP	Denise C. Lang	3000 South Fiske Blvd.
Add			Rockledge, Florida 32955
Remove Change			
Add			
Remove 4) Change			2073 AH 2
Add Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary).— (Be specific)	
	
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an amendment provides for an exchange, reclassification, or cancellation of issued shares,	_
provisions for implementing the amendment if not contained in the amendment itself:	<i>f</i> 0 ≥ 5
(if not applicable, indicate N/A)	208 -
	<u> </u>
	= ,
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The date of each amendment(s date this document was signed.) adoption:	if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date	<i>v)</i>
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirement. Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the are sufficient for approval.	mendment(s)
	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amendme	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
Dated/ Signature	7.37.23	
(By a selec	director, president or other officer – if directors or officers have cted, by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	e not been other court
	BARRY J. LANG	
	(Typed or printed name of person signing)	.
	PRESIDENT	
	(Title of person signing)	SS:

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