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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	o & Jove, INC	<u>. </u>
DOCUMENT NUMBER: <u>P Ø 6 Ø Ø Ø</u>	149269	
The enclosed Articles of Amendment and fee ar	e submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
OLINIA BO (Name o	NO f Contact Person)	
Juno &	TOVE m/ Company)	
1343 MAIN	STREET #501	·····
SARASOTA	FLORIDA 3423 ate and Zip Code)	36
For further information concerning this matter, p	please call:	
OLIVIA BOND (Name of Contact Person)	at (<u>941</u>) <u>953</u> (Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\text{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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci	rcle

Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Mouthward, hereby resign as Vica	e · Provident
of Juno & Jok Inc. (Name of Corporation)	
PØ6 Ø8149269 , a corporation organized under the l	aws of the State of
Florida	
(Signature of resigning officer/director)	FILE 07 NOV 15 SECRETARYON TAKEDAMPSSEE
	AN III

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314