P08000003a162

| (Requestor's Name) | | | |
|---|--|--|--|
| (Āddress) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
| MPK 1 & 2024 | | | |

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03/25/24--01030--015 ++35.00



COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORP | ORATION: Wicked Interiors, I | nc. | | |
|--|--|--|--|--|
| | MBER: P08000003262 | | | |
| | es of Amendment and fee are su | bmitted for filing. | | |
| Please return all cor | respondence concerning this ma | itter to the following: | | |
| | Megan Mankowski | | | |
| | | Name of Contact Person | n | |
| | Wicked Interiors, Inc. | | | |
| | | Firm/ Company | | |
| | 6139 NW 22nd Street | , | | |
| | <u> </u> | Address | | |
| | Margate, FL 33063 | | | |
| | | City/ State and Zip Cod | <u> </u> | |
| | | Cityr State and Elp Cod | • | |
| | brettmanko@gmail.com | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| | | | | |
| For further informat | ion concerning this matter, pleas | se call: | | |
| Megan Mankowski | | 954 | 464-5047 | |
| Name of Contact Person | | at (954) 464-5047 Area Code & Daytime Telephone Number | | |
| | | | | |
| Enclosed is a check | for the following amount made | payable to the Florida Depa | artment of State: | |
| \$35 Filing Fee | \$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) | |
| Mailing Address | | | Address | |
| Aı | mendment Section | Amendment Section | | |
| Division of Corporations | | Division of Corporations | | |
| P.O. Box 6327 | | The Centre of Tallahassee | | |
| P.O. Box 6327 Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

| | FILED |
|---|-----------------------|
| | 2024 MAR 25 PH 12: 50 |
|) | 7712:50 |

| (Name of Corporation as currently 08000003262 | 1000 25 6 | | |
|--|---|--|--|
| 08000003262 | filed with the Florida Dept. of State) | | |
| | the tracking of s | | |
| (Document Number of | Corporation (if known) | | |
| ursuant to the provisions of section 607.1006, Florida Statutes, this F s Articles of Incorporation: | Ilorida Profit Corporation adopts the following amendment(s | | |
| . If amending name, enter the new name of the corporation; | | | |
| licked Metal Fabrication, Inc. | The new | | |
| nme must be distinguishable and contain the word "corporation," "co Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A." | | | |
| . Enter new principal office address, if applicable: | 2901 Gateway Drive | | |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | Pompano Beach, FL 33069 | | |
| Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | | |
| . If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address: | ess in Florida, enter the name of the | | |
| Name of New Registered Agent | | | |
| The state of the s | et address) | | |
| (Florida stree | | | |
| New Registered Office Address: | , Florida | | |

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 Do | <u>ee</u> | |
|-------------------------------|--------------|--------------|---------------------------------------|-----------------|
| X Remove | <u>v</u> | Mike Jo | nes | |
| X Add | <u>sv</u> | Sally Sn | nith | |
| Type of Action (Check One) | <u>Title</u> | | Name | <u>Addres</u> s |
| 1) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | <u></u> | | |
| Add | | | | |
| Remove 3) Change | | _ | • | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | · · · · · · · · · · · · · · · · · · · | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | - | | |
| Add | | | | |
| Remove | | | | |

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| f an amendment provides for ar provisions for implementing the | exchange, reclass | ification, or cance | llation of issued sh | ares. |
| (if not applicable, indicate N | A) | contained in the | amenument jtsen: | |
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| The date of each amendmen | | , if other than the |
|--|--|--|
| date this document was signed | | |
| Effective date if applicable: | March 25, 2024 | |
| | (no more than 90 days after amendment file | date) |
| | his block does not meet the applicable statutory filing require ne Department of State's records. | ments, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/wer action was not required. | re adopted by the incorporators, or board of directors without sh | areholder action and shareholder |
| ☐ The amendment(s) was/web by the shareholders was/w | re adopted by the shareholders. The number of votes cast for the ere sufficient for approval. | e amendment(s) |
| | re approved by the shareholders through voting groups. The fold d for each voting group entitled to vote separately on the amend | |
| "The number of votes | cast for the amendment(s) was/were sufficient for approval | |
| by | | |
| | (voting group) | |
| DatedSignature | y a director, president or other officer – if directors or officers h | nave not been |
| | lected, by an incorporator – if in the hands of a receiver, trustee | |
| ង្ | pointed fiduciary by that fiduciary) | |
| | Megan Mankowski | |
| | (Typed or printed name of person signing) | |
| | Vice President | |
| | (Title of person signing) | |