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TALLAHASSEE, FLORIDA

?! JUL 22 PM 1:

OCT 2 9 2022 S. PRATHEF

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Fantasy II, Inc		
DOCUMENT NUM	202000018626		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Jeanne McCarthy		
		Name of Contact Persor	1
	Fantasy II, Inc.		
		Firm/ Company	
	3150 Florida Coach Dr		
		Address	
	Kissimmee, FL 34741		
		City/ State and Zip Code	2
		•	
	jeanne@floridacoach.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call:	
Jeanne McCarthy		at (<u>407</u>	846-2782
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	S43.75 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

FANTASY ILINC (Name of Corporation as currently filed with the Florida Dept. of State) P08000018626

(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, thits Articles of Incorporation:	nis <i>Florida Profit Corporation</i> ad	opts the following amendment
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.,	A professional corporation nu	Thenew or the abbreviation "Corp.," une_must_contain_the_word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	ddress in Florida, enter the nan	
(Florida	ı street address)	
New Registered Office Address:		, Florida (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili	ent: ar with and accept the obligation.	s of the position.
Signature of New	w Registered 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)

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.

Example: X Change	<u>PT</u>	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	S	Jeanne McCarthy	3150 Florida Coach Dr
X Add	_		Kissimmee, FL 34741
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Adđ			
Remove			
6) Change			
Add			

If amending or adding additional (Attach additional sheets, if necessary)	ry). (Be specific)		
	* · · · · · · · · · · · · · · · · · · ·		
···			
		<u> </u>	
If an amendment provides for an	exchange, reclassification, or can	cellation of issued shares.	
if not applicable indicate N	amendment if not contained in th	e amendment itself:	
(у погарупешне, такие го	: /		
			
			-
·- ·			

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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	nis date will not be fisted as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholde action was not required.	r action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amenda by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stands to 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	2022 IÀLL
by" (voting group)	2022 JUL 22 Allaria 38
July 18th, 2022 Dated	2022 JUL 22 PM 1: ALLAHAJSEE FLOI
Signature / Mrs Felward	ORI T
(By a director, president or other officer – if directors or officers have not l selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Robin Stewart	
(Typed or printed name of person signing)	
President	
(Title of person signing)	