## P09000031116

(Requestor's Name)
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C. GOLDEN
41/6 2 9 2020

## **COVER LETTER**

**TO:** Amendment Section : Division of Corporations

NAME OF CORPOR	RATION: SNEAKERGURU	JINC.	
DOCUMENT NUME			
	of Amendment and fee are si	abmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	DANIEL PETITHOMME		
		Name of Contact Perso	n
	SNEAKERGURU INC.		
		Firm/ Company	
	1342 COLONIAL BLVD ST	• •	
		Address	
	FORT MYERS, FL 33907		
		City/ State and Zip Cod	e
	SGPURCHASE@GMAIL.C	OM	
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SNEAKERGURU INC.	2536.7" 27 PH
	rently filed with the Florida Dept. of State)
P09000031116	
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s,
A. If amending name, enter the new name of the corporation	<u>ı:</u>
N/A	The second
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 name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office uddress MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
<ol> <li>If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr</li> </ol>	address in Florida, enter the name of the
N/A	
Name of New Registered Agent N/A	
(Florida	a street address)
New Registered Office Address:	,
New Registerea Office Hauress:	(City) , Florida (Zip Code)
lew Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am familia	ent: ar with and accept the obligations of the position
	me position.
Signature of Min	w Registered Agent, if changing
arguature of the	* negisierea Agent, ij changing

☐ 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Р	ERICA PETITHOMME	1342 COLONIAL BLVD STE H6
X Add			FORT MYERS, FL 33907
Remove			
2) X Change		DANIEL PETITHOMME	1342 COLONIAL BLVD STE H60
Add			FORT MYERS, FL 33907
Remove 3) Change			
Add			
Remove			
4) Change	· <del></del>	***************************************	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	nal sheets, if necessary).	(Be specific)			
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**					
11 an amendme	nt provides for an exch	ange, reclassification, o	r cancellation of issue	d shares,	
(if not app	licable, indicate N/A)	ndment if not contained	in the amendment it	self:	
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The date of each amendmen		, if other than the
date this document was signed		
Effective date if applicable:	05/08/2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on	this block does not meet the applicable statutory filing requirements, this dat the Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators, or board of directors without shareholder action	n and shareholder
■ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendment(stere sufficient for approval.	)
☐ The amendment(s) was/we must he separately provide	re approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):	nt
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
05/08 Dated	/2020	
Signature _	Daniel Petithomme	
(1)	y a director, president or other officer – if directors or officers have not been	<del></del>
SC	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
aj	opointed fiduciary by that fiduciary)	
	DANIEL PETITHOMME	
	(Typed or printed name of person signing)	
	VICE-PRESIDENT	
	(Title of person signing)	

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