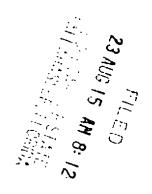
## P09000057257

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## **COVER LETTER**

N: BLACK WOOD INQUISTRIES, INC. #P09000057257 NAME OF CORPORATION:  $\_$ DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: STEPHEN E. JONES

Name of Contact Person BLACK WOOD INOUSTELES INC AMENDENG NAME CORONA TABLETUP USA 1101 NORTH LAVE DESTINYED SUITE 120
Address MATICAND, FC 3275/ US

City/ State and Zip Code SJONES BLACKUBOLGOUP NET (E-mail address: (to be used for future annual report notification (STANES@ CORDINA COM CD) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ■\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐ \$35 Filing Fee □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

**Mailing Address** 

TO: Amendment Section

Division of Corporations

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

is enclosed)

## Articles of Amendment Articles of Incorporation of



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

## BLACK WOUD

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

CORONA TABLETY name must be distinguishable and contain t	USA INC.		The ne
name must be distinguishable and contain t. "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	orp," "Inc," or "Co"	. A professional corporation	" or the abbreviation "Corp. name must contain the wo
3. Enter new principal office address, if Principal office address <u>MUST BE A ST</u>		_N A	
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		N/A	
D. If amending the registered agent and new registered agent and/or the new   Name of New Registered Agent	registered office add		ame of the
new registered agent and/or the new	registered office add		ame of the
	registered office add	ress: a street address)	

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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	nith_	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
I) <b>仏魚</b> Change		_		
Add				<del></del>
Remove				
2) Change		<del></del>		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				
remove				

<u>If amending or adding additional Art</u> Attach <i>additional sheets, if necessary).</i>	(Be specific)
NA	
	<del></del>
<u>.</u>	
t an amendment provides for an exc provisions for implementing the am	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	<del></del>
N/A	
-	<u> </u>
	<del>.</del>
	··

The date of each amendment(s) adoption: August 7/2023 if other than the date this document was signed.
Effective date if applicable: 5ept 1, 2023 Ino more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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
by''
(voting group)
Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Typed or printed name of person signing)
Tresident
(Title of person signing)