P10 0000 24941

(Re	questor's Name)	
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COVER LETTER

Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: uncoln For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & \$32.50 Filing Fee

Certified Copy (Additional copy is

enclosed)

Mailing Address

TO: Amendment Section

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

Certificate of Status

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certificate of Status

(Additional Copy is enclosed)

Certified Copy

Articles of Amendment

Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) PDOOD24941 (Document Number of Corporation (if known)
P1000024941 (Document Number of Corporation (if known)
(Document Number of Corporation (if known)
/
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) tits Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
JONESEZ 2 100
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.,"
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word
"chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: 1446 LEC DIVO Unit 114
(Principal office address MUST BE A STREET ADDRESS)
<u>= 110) 12 10 (2), 1 23 13 15 15 15 15 15 15 1</u>
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX) 1446 Lee Bly Unit 14
Lehiah Acres Fl 33936
<u>renight faces, 11 32 126</u>
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
<u> </u>
Name of New Registered Agent N 17
(Florida street address)
New Registered Office Address: , Florida , Flo
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
1/A
Signature of New Registered Agent, if changing
Signiture of New 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)

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 Doe	
X Remove	V Mike Jones	
_X Add	<u>SV</u> <u>Sally Smith</u>	
Type of Action (Check One)	Title Name	Address
1) Change	NA NA	 NIA
Add		
Remove		
2) Change		
Add		
Remove Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) A

	·
The date of each am date this document w	nendment(s) adoption: AUGUST 31, 202 , if other than the ras signed.
Effective date <u>if app</u>	(no more than 90 days after amendment file date)
	serted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
Adoption of Amend	ment(s) (CHECK ONE)
The amendment(s action was not req) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder uired.
	was/were adopted by the shareholders. The number of votes cast for the amendment(s) ers was/were sufficient for approval.
) was/were approved by the shareholders through voting groups. The following statement by provided for each voting group entitled to vote separately on the amendment(s):
"The numbe	er of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	ted $\frac{7/27/21}{2}$
Sig	(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)
	President
	(Title of person signing)