őartment of State

Division of Corporations Electronic Filing Cover Sheet

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(((H24000252300 3)))



H240002523003ABCS

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ACCOUNT BOOKKEEPING CORP

Account Number : I20120000055 Phone : (407)898-1757 fax Number : (407)897-5336

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

COR AMND/RESTATE/CORRECT OR O/D RESIGN SLPL OPEN AIR INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

Tallahassee, FL 32314

COVER LETTER

TO: Amendment Sec Division of Corp				
NAME OF CORPOR	RATION: SLPL OPEN AIR	INC		
DOCUMENT NUM				
	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	VICTOR RIVERA			
		Name of Contact P	erson	_
	ACCOUNT BOOKKEEPIN	G CORP		
	2 1112 11112	Firm/ Compan	у	_
	5301 CONROY RD SUITE	140		
		Address		— ,
	ORLANDO, FL 32811			. '
		City/ State and Zip	Code	
	OPERATIONS@ABKCORE	P.COM		<i>'.</i>
	E-mail address: (to be us	sed for future annual re	port notification)	
For further information	n concerning this matter, plea	sc call:		
VICTOR RIVERA		at (_407) 898-1757 a Code & Daytime Telephone Numb	
Name o	of Contact Person	Area	a Code & Daytime Telephone Numb	er
Enclosed is a check fo	r the following amount made	payable to the Florida	Department of State:	
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status	
Ame Divi	ling Address ndment Section sion of Corporations Box 6327	An Di	reet Address nendment Section vision of Corporations te Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

:	. 4	07/31/2024	08:11 AM	TO:185061763	30 FROM:40789 H24000	75336)2523003					
				Articles of Amendm	ent						
				to							
				Articles of Incorpora of	tion						
SI											
	(Name of Corporation as currently filed with the Florida Dept. of State)										
נמ	100000	00110	(Ivame of Corpora	ition as currently mea v	vitil the Florida Dept. of	State)					
	100000	79139									
			(Doc	ument Number of Corpor	ation (if known)						
Pu	ursuant	to the provisions of sec	ction 607.1006, Flori	ida Statutes, this <i>Florida</i>	Profit Corporation adopt	ts the following amendin					
its	s Article	es of Incorporation:									
Α.	. If am	ending name, enter th	he new name of the	corporation:							
					2 42	The ne					
					o," or "incorporated" or i sional corporation name						
		ed," "professional asso			orania corporano, mana						
Đ	Umton	and a single floor	address if anniisat	1520	COROLLA CT	20					
		new principal office of office address MUST		DARESS							
	•	-3,7.		REU	NION, FL 34747	· <u> </u>					
						, i.s					
						: '					
C.		r new mailing address		1520	COROLLA CT	至					
	(1)1411	ing address <u>MAY BE</u> ,	A POST OFFICE B		STONE DE LA TAT						
				KEU:	NION, FL 34747	သ သ					
D.					<u>lorida, enter the name o</u>	of the					
	new r	egistered agent and/o	r the new registere	<u>d office address:</u>							
	Z	Vame of New Registere	ed Agent								
			1520 COR	OLLA CT							
				(Florida street addre	(57)						
			REUNION	•		. 34747					
	۵	<u>New Registered Office 2</u>	Address:		, Flo	orida					
				(City)		(Zip Code)					
N'a	u Bac	istered Agent's Signa	tuva ifahandus D	naistanad kas-t-							

Signature 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.

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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>\$V</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
i) X Change	D	AMANDA BITENCOURT RODRIG	1520 COROLLA CT	
Add			REUNION, FL 34747	
Remove				
2) Change			2021	
Add			<u> </u>	1
Remove 3) Change			<u>.'.</u>	m)m)
Add			<u> </u>	
Remove			်း မ	
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
A Change				
Add				
Remove				

Page:	•6.	07/31/2024	08:11 AM	TO:18506176380	FROM: 4078975336	2				
		ite of each amendmen is document was signed			124000252300	if other than the				
	Effecti	ve date <u>if applicable</u> :		(no more than 90 days after a	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.									
	Adopti	on of Amendment(s)	(CHE	CK 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 amend	iment(s) was/were sufficient	for approval	1077 JUL .				
		by	(votin	ig group)	***	<u>ω</u> =				
		Dated O	130/2024							
		Signature	<u>ju</u>	audo Keiri	J	. 				
		se		porator – if in the bands of a	ctors or officers have not been a receiver, trustee, or other cou					
	AMANDA BITENCOURT RODRIGUES AZEVEDO									
			П	Typed or printed name of per	rson signing)					
			DIRECTOR							

(Title of person signing)