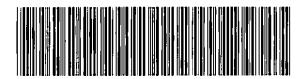
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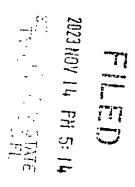
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Sacrited Entry Name)
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COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	DRATION: MICHAELS AMUS	SEMENTS INC	· · · · · · · · · · · · · · · · · · ·		
	IBER: P11000034278				
The enclosed Article	s of Amendment and fee are sub	omitted for filing.			
Please return all corr	espondence concerning this mat	ter to the following:			
	MONICA ZIMMER LAWSO	N			
		Name of Contact Person	1		
	ZIMMER ACCOUNTING SERVICE INC				
		Firm/ Company			
	11312 BLOOMINGDALE AVE STE 108 PMB 374				
		Address	<u> </u>		
	RIVERVIEW FL 33578				
		City/ State and Zip Cod	e		
	monicalawson@zimmeraccou	inting.com			
	E-mail address: (to be us	ed for future annual report	notification)		
For further informati	on concerning this matter, pleas	e call:			
MONICA Z LAWS	ON	at (813	354-8301		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made p	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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section		Amend	Address Iment Section		
Di	vision of Corporations	Divisio	on of Corporations		

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

MICHAELS AMUSEMENTS INC

FILED

ю

(Name (of Corporation as currently	y filed with the Florid	da Dept. of State)
	P110000 340	278	2023 ROV 14 PH 5: 11
	(Document Number of		
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this i	Florida Profit Corpor	ation adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co" chartered," "professional association,"	Corp," "Inc," or "Co". A	company," or "incorpe professional corpor	orated" or the abbreviation "Corp.," ation name must contain the word
B. Enter new principal office address,		-	
(Principal office address <u>MUST BE A S</u>	IKEEI ADDKESS)		

C. Enter new mailing address, if appli			
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)		
•			
D. If amending the registered agent an new registered agent and/or the new			the name of the
	SHERRY REISINGER	_	
Name of New Registered Agent	11312 BLOOMINGDALE	AVF	 _
	(Florida stre		
	SAME	ces mas con	
New Registered Office Address:		/Cina	, Florida(Zip Code)
		(City)	(zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:	:	
I hereby accept the appointment as regist			ligations of the position.
	\.		
<u></u>	her Reising a Signature of Now Ro		
	Ci to CV	- in the second of the second	In the second se
	y Signature of N ew Re	egistorea Agent, if cha	ngmg
Check if applicable			
☐ The amendment(s) is/are being filed p	oursuant 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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Þ	MICHAEL REISINGER	P.O. BOX 64636
Add			FAYETTEVILLE NC 28306
X Remove			P.O.BOX 64636
2) X Change	Р	SHERRY RESINGER	FAYETTEVILLE NC 28306
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>addit</i>	or adding addi- tional sheets, if n	ecessary). (B	'e specific)	<u>-</u>			
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	lment provides i	for or ovahone		ion or samualla	tion of invende	haras	
orovisions	for implementing	ng the amendo	e, reclassification	ained in the arr	endment itself	<u>nai es,</u> :	
(if not a	applicable, indica	ate N/A)				-	
					 -		
	 			·			
		_		_			
•					<u></u>		

NOV. 9, 2023	
The date of each amendment(s) adoption:	, if other than the
NOV. 9. 2023 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, this date we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action as action was not required.	nd shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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)	
NOV. 9, 2023	
Signature Showy Reisensc	
(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)	
SHERRY REISINGER	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	