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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations 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: Crosory C Pits
Name of Contact Person 3 Dollar Mula, Inc. Firm/ Company 355 Limerick Lane Pensacole FC 32514 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (<u>350</u>) <u>516-4970</u> Area Code & Daytime Telephone Number 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 & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations**

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation

1/T/T = 7	
(Name of Compression as observation	U(. filed with the Florida Dept. of State)
	_
F110000 855	YYY Corporation (if known)
(Document Number of	Corporation (ii known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	<i>llorida Profit Corporation</i> adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
3 Dollar Mula	TAIC. The new
name must be distinguishable and contain the word "corporation," "co" "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	. 2
C. Enter new mailing address, if applicable:	71
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	ψ
	, vi
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et aaaress)
New Registered Office Address:	City) , Florida (Zip Code)
· '	(λη εδιίε)
New Registered Agent's Signature, if changing Registered Agent:	
Thereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered 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 Doc 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	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change		-	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			·
4) Change			
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5) Change			
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6) Change			
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	dding additional Arti sheets, if necessary).		<u>(e(s) bere:</u>		
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The date of each amendment(s) ac	loption:	, if other than the
late this document was signed.	-	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file a	late)
Note: If the date inserted in this blocument's effective date on the De	lock does not meet the applicable statutory filing requirempartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without sha	reholder action and shareholder
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the fficient for approval.	amendment(s)
	roved by the shareholders through voting groups. The followard each voting group entitled to vote separately on the amend	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	,"	
,	(voting group)	
Signature	12-2020 Deca C fello	
(By a d i	rector, president or other officer - if directors or officers ha	ive not been
	I, by an incorporator – if in the hands of a receiver, trustee, ed fiduciary by that fiduciary)	or other court
	(Typed or printed name of person signing)	
	(Typed or prifited name of person signing)	
	Presiclent	
	(Title of person signing)	-