From: Donna Forbes

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

(850)617-6380

From:

Account Name :: GANDD 'ENTERPRISE' DIVERSIFIED 'LLC

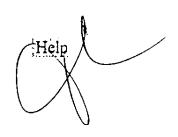
Account Number :: 120240000017 Phone: 11 (678)788-59565 :::.(404)393-3668; Fax, Number,

#\*tEnten! the 'email\* address' for this business 'entity' to be "used for future" annual report mailings. Enter only one email address please. \*\*\*

COR AMND/RESTATE/CORRECT OR O/D RESIGN HATSUE ENTERPRISES, INC.

Certificate of Status	1
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TO: Amendment Section

## COVER LETTER

Division of Cor	porations;					
NAME OF CORPO	RATION: HATSUE ENTE	RPRISES INC				
DOCUMENT NUM	IBER: 'P11000108433	<u></u>				
The enclosed Article	s of Amendment and fee are sub	mitted for filing.,	•	,		
Please return all corr	espondence concerning this matt	er to the following	 g:			
***************************************	Donna Forbes					
	<del></del>	Name of Contac	et Person (		<del></del> :	
	GandD Enterprise Diversified,	LLC				
	n accounts	Firm/Com	pany		<del></del>	
	2524 B	rittany Park Lane			<del></del> ;	د~
: Address						1021
Ellenwood, GA 30294;						30
	City/ State and Zip Code					
	ganddenterprisel@gmail.com;					1
	E-mail address: (to be use	d for future annua	l report noti:	ication)	;	王
For further informati	on concerning this matter, pleasi	e'call:				2024 OCT 17 AH 9: 40
:Donna F	orbės	aî (:	[678]	,788-5956 Daytime Telephone Num		
Name	of Contact Person;	,	Area Code &	Daytime Telephone Num	pëi	
Enclosed is a check	for the following amount made p	ayable to the Flor	ida Departmi	ent of State:		
S35 Filing Fee	DAS43.75 Filing Fee & Certificate of Status	343.75 Filing Fe Certified Copy (Additional cop enclosed)	y is	O Filing Fee Certificate of Status : Certified Copy (Additional Copy is enclosed)		
Ar Di P	alling Address: nendment Section vision of Corporations D. Box 6327 Illahassee, FL 32314		The Centre	t Section? Corporations of Tallahassec Onroe Street; Suite 810		

## Articles of Amendment on

	to!
	Articles of Incorporati
	of î
HATSUE ENTERPRISES, INC.	
(Name of Cor	poration as currently filed w
<del>-</del>	

ith the Florida Dept. of State); P11000108433 (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 its Articles of Incorporation: A: If amending name, enter the new name of the corporation: The new 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: 1646 Providence Blvd (Principal office address MUST BE A STREET ADDRESS) Deltona, FL 32725? C. Enter new mailing address; if applicable; 1646 Providence Blvd (Mailing address MAY BE A POST OFFICE BOX) Deltona, FL 327251 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: Name of New Registered Agent (Florida street address) New Registered Office Address; : Florida (Zip Code) (City) 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;

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.

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.

X Change	<u>"PT</u> " " <u>JG</u> "	ohn Doe			
X Remove	· <u>V</u> : ' <u>N</u>	like Jones ,			
<u>-X</u> ∮Add	<u>sv</u> : <u>s</u>	Sally Smith			
Type of Action (Check One);	-Tille	Name	Address		
.1)}Change		Mary H. Teruya	2816 E. Robinson Street		
Add			Orlando, FL 32803		
[Remove]			202		
Add,			2007		
Remove :		<del>1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -</del>			
Àdd,			M 9: 40		
Remove					
4) Change		,	:		
Add .			_ <del></del> ;		
Remove;			· · · · · · · · · · · · · · · · · · ·		
(5) Change			1		
Add;			:		
Remove;					
6),Change	·	· <u></u>	<u> </u>		
Add;			,		
*Remove;					

If amending or add (Attach additional si	ding additional Artic heets, if necessary)	cles, enter chang (Be specific)	e(s) here:			
• •	ration is authorized	**	ousand Shares (I.	000.00 Shares	) of \$1.00 Par	value
	shall be designated			•	,	
	m grad the grad of services	*** ** ** ** ** *** ******************		<del></del>	<del>-</del>	
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If an amendment p	provides for an exch	ange, reclassific	ation, or cancella	tion of issued s	 hares,	
iprovisions for imp	plementing the amen ble, indicate N/A):	idment if not co	ntained in the am	endment itsel	<u>î:</u> ;	
(i) not applica	bie, mulcale 10%)					
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•:

The date of each amendment(s) adopt	lion:	if other than the
date this document was signed.	<u> </u>	<del></del> .
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will ment of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	d by the incorporators, or board of directors without shareholder action and	l'shareholder
The amendment(s) was/were adopted by the shareholders was/were suffice	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.	20
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	2024 OCT 17 AH
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by <sub>. :</sub>	<b>,</b>	
A A A Commission of the Commis	(voting group)	
Dated 100/17/200241		M 9: 40
selected, by	or, president or other officer – if directors or officers have not been yan incorporator – if in the hands of a receiver, trustee, or other court induciary by that fiduciary)	
	Hector Ledesma;	,
	(Typed or printed name of person signing)	
p	President	
•	(Title of person signing)	<del> :</del> :