## P120000 4318

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
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(D)	ocument Number)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: EOJ, INC.				
DOCUMENT NUM	D12000004216				
The enclosed Articles	of Amendment and fee are su	ibmitted for fil	ing.		
Please return all corre	spondence concerning this ma	itter to the follo	owing:		
	P. TRISTAN BOURGOIGN	IE, ESQ.			
		Name of C	ontact Perso	n	
	TRISTAN BOURGOIGNIE	, P.A.			
		Firm/	Company	<del></del>	
	5975 SUNSET DRIVE, SUI		er er er		
		Ad	dress	·	
	MIAMI, FL 33143				
		City/ State	and Zip Cod	c	
PTB	@MIAMI-DROIT.COM				
	E-mail address: (to be us	sed for future a	nnual report	notification)	
			•		
For further informatic	on concerning this matter, pleas	se call:			
P. TRISTAN BOURG	SOIGNIE		305	200 0350	
	at		de & Daytime Telephone Number		
Name	of Contact Person		Arça Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the	Florida Depa	artment of State;	
S35 Filing Fee	☐S43.75 Filling Fee & Certificate of Status	S43.75 Fi Certified (Additional enclosed)	Copy of copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Street	Address	
	endment Section		Amendment Section		
	ision of Corporations . Box 6327	Division of Corporations			
	lahassee, FL 32314			Building Executive Center Circle	
1 (4)			-0011	meening center offer	

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation

(Name of Corporation	n as currently filed with the Florida Dept. of State)
P12000004318	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	RESS )
	72 70
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	DCT - F
(Mailing dualess MAT BL A FOST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	fice address:
	ffice address:
new registered agent and/or the new registered off	(Florida street address)
new registered agent and/or the new registered off	

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	PT Jol	nn Doc	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	BRIGITTE BENICHAY	100 N. BISCAYNE BLVD
Add	<del></del>		SUITE 3050
XX Remove			MIAMI, FL 33132
2) Change	VP, D	JACK MELKI	1100 WEST AVENUE
XX Add	<del></del>		SUITE 1026
Remove			MIAMI BEACH, FL 33132
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		·	
Add			
Remove			
6) Change			
Add			
P.,mora			

Attach additional shee	g additional Artic ets, if necessary).	(Be specific)			
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an amendment pro	vides for an excha	inge, reclassifica	tion, or cancellati	on of issued share:	<u>s.</u>
provisions for implei	menting the amen	dment if not con	tained in the ame	ndment itself:	
(if not applicable	, indicate N/A)				
				12.	
				<del></del>	
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-,-					
·,-					
		·		<del></del>	

	OCTOBER 10, 2019	
The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	tno more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date v Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was:were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
ОСТОВ	ER 11, 2019	
Dated		
	A STATE OF THE STA	
Signature		<del></del>
	a director, president or other officer – if directors or officers have not been	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court printed fiduciary by that fiduciary)	
-Tr	·	
	JACK MELKI	
	(Typed or printed name of person signing)	
	VP & DIRECTOR	
	(Title of person signing)	