## P13000017356

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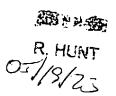
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

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NAME OF CORPORA	ATION: _Witty Things, Inc				
DOCUMENT NUMBE					
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
	Stephanie Sanders				
_		Name of Contact Persor	1		
	Witty Things, Inc				
_		Firm/ Company			
	203 W Lloyd Street				
_		Address			
	Pensacola, FL 32501				
-		City/ State and Zip Code			
	ssanders@wittythings.	com			
_	E-mail address: (to be us	ed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Stephanie Sanders		at ( <u></u>	333-5055		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of Stare		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address 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

Witty Things, Inc.	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P12000017256	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Witty Things Designs, inc.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	"company," or "incorporated" or the abbreviation "Corp"  A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRESS)	· 53
	123
C. Enter new mailing address, if applicable:	表 6 1
(Mailing address MAY BE A POST OFFICE BOX)	NA SOO P
	PATE FL
D. If amending the registered agent and/or registered office ad	
new registered agent and/or the new registered office addre	<u>sss:</u>
Name of New Registered Agent NA	
(Florida :	street address)
New Registered Office Address: NA	. Florida
	(City) (Zip Code)
Non-Designated Agency Cinemators of the major Designand Agen	and a
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia	
Circumstance of Many	Registered Agent, if changing
Signature of New	кехіметей ядет, іј спинуту
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 <math>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 Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>\$V</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) NA Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_ <del>_</del>		
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or (Attach additional	adding additional Articles al sheets, if necessary). (L	s, enter change(s) here Be specific)	P.		
NA					
			-		
					,
			<del></del>	<del></del>	
			<del></del>		
					_
		<del>- ·</del>		·	
		<del></del>			
		· 		<del></del>	
F If an amendmer	nt provides for an exchang	ge, reclassification, or	cancellation of issue	d shares.	
provisions for :	implementing the amenda	nent if not contained	in the amendment its	elf:	
(ij not appi NA	icable, indicate N/A)				
<del></del>					
			<u></u>		
	<u></u>		<del>-</del>		

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if annicable:	
(no more than 90 days after a	mendment file date)
Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.	v filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of direct action was not required.	tors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of v by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	roups. The following statement ly on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient f	or approval
N:A	· ·
by (voting group)	<del></del> ,
SS	
Dated $\frac{3!12!2023}{5/15/23}$	
Dated S 1/8/ & 3	
Signature Schokeni Sa	nders
(By a director, president or other officer - if director	
selected, by an incorporator – if in the hands of a r appointed fiduciary by that fiduciary)	eceiver, trustee, or other coun
.,	
Stephanie Sanders	
(Typed or printed name of person	on signing)
PVDT	
(Title of person signing)	