

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H19000298467 3)))



H190002984673ABCD

**Note: DO NOT hit the REFRESH/RELOAD button on
your browser from this page. Doing so will generate
another cover sheet.**

To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : COMITER & SINGER, LLP
Account Number : I20000000085
Phone : (561)626-4742
Fax Number : (561)626-4742

****Enter the email address for this business entity to be used for future
annual report mailings. Enter only one email address please.****

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D
RESIGN**

TURKANIS LEATHERWORKS, INC.

Certificate of Status

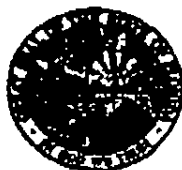
0

Certified Copy	1
Page Count	11
Estimated Charge	\$43.75

Electronic Filing
Menu

Corporate Filing Menu

Help



October 7, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

TURKANIS LEATHERWORKS, INC.
7631 NW 33RD STREET
UNIT #6
DORAL, FL 33172US

SUBJECT: TURKANIS LEATHERWORKS, INC.
REF: P12000063641

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

FAX Aud. #: H19000295498
Letter Number: 719A00020571

RECEIVED

2019 OCT -7 AM 7:59

(((H19000295498 3)))

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TURKANIS LEATHERWORKS, INC.DOCUMENT NUMBER: P12000063641The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Keith B. Braun Esq.

Name of Contact Person

Comiter, Singer, Baseman & Braun, LLP

Firm/ Company

3801 PGA Boulevard, Suite 604

Address

Palm Beach Gardens, FL 33410

City/ State and Zip Code

mfrld@comitersinger.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Keith B. Braun, Esq.

Name of Contact Person

at (561)626-2101

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 &
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(((H19000295498 3)))

Articles of Amendment
to
Articles of Incorporation
of

(((H190002954983)))

2019 OCT -7 AM 9:00

TURKANIS LEATHERWORKS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000063641

(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:

Leatherwks, Inc.

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:
(Principal office address MUST BE A STREET ADDRESS)

9631 NW 33RD STREET

UNIT #6

DORAL, FL 33172

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

9631 NW 33RD STREET

UNIT #6

DORAL, FL 33172

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: Comiter, Singer, Baseman & Braun, LLP

3801 PGA Boulevard, Suite 604

(Florida street address)

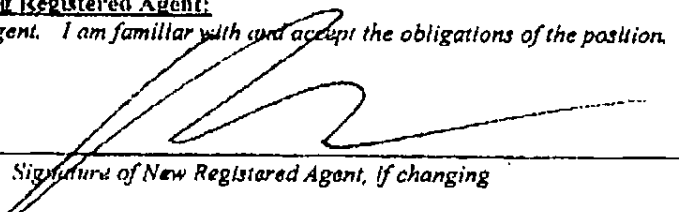
New Registered Office Address: Palm Beach Gardens, FL 33410

(City)

(Zip Code)

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

(((H19000295498 3)))

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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____

(((H19000295498 3)))

((H19000295498 3)))

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued claims,
provisions for implementing the amendment if not contained in the amendment itself.
(if not applicable, indicate N/A)

((H19000295498 3)))

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/02/19

Signature Michael Turkanis
(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)

Michael Turkanis

(Typed or printed name of person signing)

President

(Title of person signing)