## P120000081288

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: 4 EVER SMOOTH	INC	
DOCUMENT NUMBE	ER: P12000081288		
The enclosed Articles of	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
II	RIT KEIDAN		
<u></u>	· ·	Name of Contact Person	<u> </u>
4	EVER SMOOTH INC		
_		Firm/ Company	
1	0492 HARRIER STREET		
_		Address	<del></del>
P	LANTATION FL 33324		
_		City/ State and Zip Code	:
fic	orever@foreversmooth.net		
<del>-</del> -	E-mail address: (to be us	ed for future annual report	notification)
	concerning this matter, pleas		
IRIT KEIDAN		at (	_) 658-7785
Name of	Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for t	the following amount made p	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 bassee, FL 32314	Amend Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	y filed with the Florida Dept. of State)	
4 EVER SMOOTH INC P12000081288		
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:		
		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."		
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		3
C. Enter now mailing address if applicables	έ,	ند.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		-
· · · · · · · · · · · · · · · · · · ·		
	<del></del>	<del></del>
D. 16	t Plant and some	·.: - <del></del>
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		_
	_	
Name of New Registered Agent	<del></del>	
(Florida sti	eet address)	
New Registered Office Address:	, Florida	
	(City) (Zip C	ode)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		
r nevery accept the appointment as registered agent. I am jamutar	vin and accept the obligations of the position.	
Signature of New R	egistered Agent, if changing	
Charle of conflorable		
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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	KEREN KEIDAN	10492 HARRIER ST PLANTATIO
Add X Remove			
2) Change	P	GSKS FAMILY II LLC	10492 HARRIER ST PLANTATIO
X Add Remove 3) Change	<u>s</u>	IRIT KEIDAN	10492 HARRIER ST PLANTATIO
X Add Remove 4) Change			
Add Remove 5) Change Add			
Remove 6) Change Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s (Be specific)			
· · · · · · · · · · · · · · · · · · ·				
			-	
		_		
	-			
		<del></del>		
· ·				
f an amendment provides for an excl	nange, reclassificatio	on, or cancellation o	of issued shares,	
provisions for implementing the amo	endment if not conta	ined in the amendn	nent itself:	
(if not applicable, indicate N/A)				
				<u> </u>
		-		_
	,,			
			<del></del>	
<u> </u>				

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The date of each amendment(s) adoption:	er than
Effective date if applicable:	
(no more than 90 days after amendment file date)	_
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.	sted as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sharehold action was not required.	ler
☐ 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	
by	
Dated	
Signature	
(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)	
KEREN KEIDAN	
(Typed or printed name of person signing)	_

**PRESIDENT** 

(Title of person signing)

the

the