P13000013464

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(Cit	y/State/Zip/Phone	e #)
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2022 HAR -7 PH 12: 29

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SISTER WIVES, I	NC.	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	BRANDON LLEWELLYN		
	SAVOY ORLANDO	Name of Contact Person	1
	·	Firm/ Company	
	1913 N ORANGE AVE		
		Address	
	ORLANDO, FL 32804		
		City/ State and Zip Cod	e
	BRANDONSAVOYORL@C	GMAIL.COM	
•	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
BRANDON LLEWEL	LYN	at (<u>407</u>	474-0723
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 State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ing Address indment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division The Co 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, F1, 32303

Articles of Amendment Articles of Incorporation of

FILED

of	•	
SISTER WIVES, INC.	2022 HAR - filed with the Florida Dept. of:State) 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	-7 PM 12: 29
(Name of Corporation as currently	filed with the Florida Dept. of:State)	TO DECIMATE
P13000013464	TALLAH	ASSEE, FI
(Document Number of		
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Prafit Corporation adopts the following	ng amendment(s) t
A. If amending name, enter the new name of the corporation:		
SAVOY ENTERPRISES, INC		T1.
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered." "professional association," or the abbreviation "P.A."		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent		_
(Florida stree	u nddrasc)	_
New Registered Office Address:	, Florida Yiyy	(Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.	
Signature of New Res	gistered Agent, if changing	_
Check if applicable		
Susan a althurance		

☐ 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.

Example: 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>			Address	
1) X Change	P CEC	BRAN	DON LLEWELLYN		1110 CARLSON DR	
Add					ORLANDO, FL 32804	
Remove				,		
2) Change	PT	PATRI	CK RAZO			
Add						
X Remove 3) Change						
Add						
Remove						
4) Change		 				
Add						_
Remove						
5) Change						
Add						
Remove						
6) Change		<u> </u>				
Add						
Remove						

E. If amendin (Attach addi	<mark>g or adding additio</mark> tional sheets, if nece	nal Articles, enter of sary). (Be specif	change(s) here: ic)			
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. <u>If</u> an amen	dment provides for	an exchange, recla	ssification, or ca	ncellation of issue	d shares,	
provisions	for implementing tapplicable, indicate	<u>he amendment if n</u>	ot contained in t	he amendment its	elf:	
(9 /10/	upplicume, macine	(0.4)				
						
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MARCH 1, 2022 The date of each amendment(s) adoption: _ _____, if other than the date this document was signed. MARCH 1, 2022 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 incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ 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) MARCH 1, 2022 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) BRANDON LLEWELLYN (Typed or printed name of person signing) PRESIDENT CEO (Title of person signing)