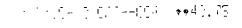
P130000 19982

(Req	uestor's Name)	
(Add	ress)	
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(City.	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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C Kluzek

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: TINY TULIP, INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Crystal Stejskal Tiny Tulip Firm/ Company 1240 Momasnile Rd. Suite 101 Tallahassee, FL 32303
City/State and Zip Code E-mail address: no be used for future annual report notification) For further information concerning this matter, please call: Crystal Stejskal at (850), 570-9149

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S43.75 Filing Fee & ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee

Certified Copy

enclosed)

(Additional copy is

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certificate of Status

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment

Articles of Incorporation of

tiny tulip, Ir	٧૮ .
(Name of Corporation as currently	filed with the Florida Dept. of State)
P13000019982	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation "o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1240 Momasville Ra.
(Principal office address MUST BE A STREET ADDRESS)	Suite 101
	Tallahassee, FL 32303
	[a nariasee) PL 22003
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1240 Momasville Rd.
	Suite 101
	Tallahassee, FL 32303
	Tallariassee, FC 32003
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent N/A	
(Florida stre	et address) ZO
New Registered Office Address: NIA	Florida S
6	City) (Zip Code)
•	
New Registered Agent's Signature, if changing Registered Agent:	ith and accept the obligations of the position.
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position. $\stackrel{\sim}{\sim}$
	7
NA	
Signature of New Re	gistered Agent, if changing

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		Peter Stejskal	2138 Amarda Macct.
Add			Tallahassec, FL 32312
Remove			
2) Change	V	Abigail Stejskal	2700 Welaunee Blvd.
✓ Add			Unit 703
Remove			Tallahassee, FL 32308
3) Change		<u> </u>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N / A	<u>II amending o</u> Attach <i>additio</i>	r adding additional Articles, enter change(s) here: nal sheets, if necessary). (Be specific)	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: ((if not applicable, indicate N/A)	t		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	NIH		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
(if not applicable, indicate N/A)	<u>f an amendm</u>	ent provides for an exchange, reclassification, or cancellation of issued shares,	
	provisions fo	r implementing the amendment if not contained in the amendment itself:	
NIH		pricane, maicae maj	
	NIH		

Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast i	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated	11/19
Signature	Oupirel Stepskal
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Crystal Stejskal (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
•	(Title of person signing)