(Req	uestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Fayette Bikini Cor	mpany 		
DOCUMENT NUM	BER: P13000025890			
	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	ntter to the following:		
	Danielle Harangody			
		Name of Contact Person	n	
	Fayette Bikini Company			
		Firm/ Company		
	3005 Sunrise Blvd			
		Address		
	Fort Pierce, FL 34982			
		City/ State and Zip Cod	c	
	dharangody@yahoo.com			
		sed for future annual report	notification)	
For further information	n concerning this matter, plea		6016870) de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	[]]\$43.75 Filing Fee & Certificate of Status	L1843.75 Filing Fee & Certified Copy (Additional copy is enclosed)	[7]\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address endment Section		Address Iment Section	
Div	Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, F1, 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
			N. Monroe Street, State 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

Favette Bikini Company

(Name of Corporation as curren	itly filed with the Florida De	ept, of State)
P13000025890		
(Document Number	of Corporation (if known)	··
Pursuant to the provisions of section 607, 1906, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation	adopts the following amendment(s
A. If amending name, enter the new name of the corporation:		
Studio 440 Co.		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	A professional corporation	U or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	3005 Sunrise Blvd	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Fort Pierce, FL 34982	20
		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3005 Sunrise Blvd	B
	Fort Pierce, FL 34982	AH C
D. If amending the registered agent and/or registered office ad		ame of the
new registered agent and/or the new registered office addre	<u>881</u>	
Name of New Registered Agent		
3005 Sunrise Blvd		
(Florida s	street address)	
Now Registered Office Address: Fort Pierce		34982 Florida
	(City)	(Zip Code)
	City)	. Florida <u>(Zip Code)</u>
Stranger of Many	Registered Agent, if changing	·— ———
Signature of New	кедімегеа Адені, ң спандінд	

Check if applicable
[L] 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)

Example:

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

X Change	$\overline{\mathbf{b}}$	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			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	. —		
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

	·· -		
	 		
<u>imendment provides for an exchange, reclassification, or</u>	<u>eancellation of iss</u>	ued shares,	
isions for implementing the amendment if not contained	in the amendment	itself:	
if not applicable, indicate N/A)			
	· · · · · · · ·		
			
			

.

	3/13/2023	
The date of each amendment(s) ac	loption:	if other than the
date this document was signed.		
	/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after am	endment file datet
Note: If the date inserted in this bedocument's effective date on the De		iling requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were addaction was not required.	pted by the incorporators, or board of directo	rs without shareholder action and shareholder
ETThe amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of vot flicient for approval.	es east for the amendment(s)
	roved by the shareholders through voting groeach voting group entitled to vote separately	
"The number of votes cast	for the amendment(s) was/were sufficient for	approval
by		
· · · · · · · · · · · · · · · · · · ·	(voting group)	
Dated		
_	A	
Signature	c prunger	
	rector, president or other officer if directors I, by an incorporator - if in the hands of a rec	
	ed fiduciary by that fiduciary)	erver, trustee, or other court
	, ,	
	Danielle Harangody	
	(Typed or printed name of person	signing)
	President	
	(Title of person signing)	