## P130000057525

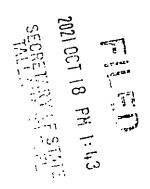
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Q. SILAS				
OCT 2 / 2021				

Office Use Only



000375046690

10/18/21--01011--004 \*\*85.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BISSO ENTERPR	ISE INC		
DOCUMENT NUM	BER: P13000057525			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	YUDERCA M BARBERA			
		Name of Contact Persor	1	
	BUSINESS PLUS TAX SOL	UTIONS INC		
		Firm/ Company		
	5258 GOLDEN GATE PKW	Y SUITE 106		
		Address		
	NAPLES, FL 34116			
		City/ State and Zip Code	:	
	yudy@businessplustaxes.com	1		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas		643,9968	
	·	at ( <sup>239</sup>	) 043-7706	
Name of Contact Person		Area Coo	le & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:	
■ \$35 Filing Fee	☐\$43.75 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

FILED

2021 OCT 18 PH 1:43

BISSO ENTERPRISE INC

(Name	of Corporation as current	ly filed with the Florida-F	Pept. of State
P13000057525		1.	ALLATAD E. ITL
<del></del>	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporatio	n adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "Chartered," "professional association,"	Corp." "Inc," or "Co"	4 professional corporation	
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>			
D. If amending the registered agent ar new registered agent and/or the new			name of the
Name of New Registered Agent	BUSINESS PLUS TAX S	<del></del>	
	5258 GOLDEN GATE PK	WY SUITE 106	
	(Florida str	eet address)	
New Registered Office Address:	NAPLES		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	tered agent. Lam familiar		
Check if applicable  ☐ The amendment(s) is/are being filed p	ursuant 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> <u>J</u>	John Doe	
X Remove	<u>v</u> <u>N</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	LUISA AUDIBERT	1265 WILWOOD LAKES BLVD
X Add			APT 207
Remove			NAPLES, FL 34104
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additi</i>	or adding ad ional sheets, if	necessary).	(Be specific	)			
			A.				
			<u>_</u>				-
<del></del>							
			<del>-</del>		•		
					_		
-	<del></del>						
							<del></del>
		<del></del>	<u> </u>				<del></del>
<del></del>							
f an amendr	ment provides	s for an exch	ange, reclass	ification, or c	ancellation of i	ssued shares,	
<u>provisions i</u> (if not a	or impiement pplicable, indi	iing the amei icate N/A)	nameni 11 noi	contained in	the amendmen	it itself:	
()		,					
<u> </u>			<del></del>				
			<u>-</u>				
						<del></del>	-

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 amendme	nt file date)
	is block does not meet the applicable statutory filing repeatment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast e sufficient for approval.	for the amendment(s)
	approved by the shareholders through voting groups. To for each voting group entitled to vote separately on the	
"The number of votes	east for the amendment(s) was/were sufficient for appro-	val
by		
,	(voting group)	
10/13/2 Dated	021	
Signature	a director, president or other officer – if directors or off	care have not been
sele	a director, president of other officer – If directors of officered, by an incorporator – if in the hands of a receiver, to ointed fiduciary by that fiduciary)	
	CRISTINA E STYLIANOUDAKIS	
	(Typed or printed name of person signing	<u>g</u> )
	PRESIDENT	
	(Title of person signing)	<del></del>