P13000074610

(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Kiwi Publishing, I	nc.	
DOCUMENT NU	P13000074610		
The enclosed Articl	es of Amendment and fee are su	abmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	Alexis Heffner		
		Name of Contact Perso	n
	2377 NW 49th Lanc	Firm/ Company	
	Boca Raton, FL 33431	Address	
		City/ State and Zip Cod	e
For further informat	hac507@gmail.com E-mail address: (to be use the first term of the	sed for future annual report	notification)
Howard Cohan		at (⁵⁶¹	350 9406
Nam	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
\$35 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)
Ai Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment Articles of Incorporation

Kiwi Publishing, Inc.	H I Event Court Court
5	rrently filed with the Floridal Deal 27 \$18 te PH 5: 58
P13000074610	
	SECRETARY OF STATE
(Document Nur	nber of Corporation (if known) TALLAHASSEE, FL
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporati	on:
ALIA	The new
"Inc.," or Co.," or the designation "Corp." "Inc," or "C "chartered," "professional association," or the abbreviation "B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	— N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office as Name of New Registered Agent	
New Registered Office Address: New Registered Office Address:	(City) , Florida (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

Add

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 <u>Title</u> **Name** Address (Check One) Sarah Biernbaum VP 2377 NW 49th Lane 1) ____ Change Boca Raton FL 33431 Add ____ Remove Howard Cohan 2377 NW 49th Lane 2) ____ Change Boca Raton FL 33431 Add Remove Roana Cohan 3) ____ Change 2377 NW 49th Lanc Boca Raton FL 33431 _ Add ____ Remove 4) ____ Change ____ Add _ Remove 5) ____ Change Add ____ Remove 6) ____ Change

. If amending or adding a (Attach additional sheets,	if necessary). (Be specif	rnange(s) nere: îc)			
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If an amendment provid provisions for implemen	es for an exchange, recia- ting the amendment if n	ssification, or can ot contained in th	<u>cellation of issued</u> e amendment its	l shares, elf:	
(if not applicable, in	dicate N/A)				
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date this document	nendment(s) adoption:
Effective date <u>if ap</u>	plicable:
	(no more than 90 days after amendment file date)
Note: If the date is document's effective	nserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the e date on the Department of State's records.
Adoption of Amen	dment(s) (<u>CHECK ONE</u>)
The amendment(action was not re	s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder quired.
	s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ers was/were sufficient for approval.
	s) was/were approved by the shareholders through voting groups. The following statement ely provided for each voting group entitled to vote separately on the amendment(s):
"The numb	er of votes cast for the amendment(s) was/were sufficient for approval
by	
	(voting group)
D	4.5.2021 ated
Si	gnature_alexis Heffner
	(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)
	Alexis Heffner
	(Typed or printed name of person signing)
	President
	(Title of person signing)

ROANA COHAN		63-8413/2670	4055
ALEXIS COHAN 2377 NW 49TH LN.		/ 1	1055
BOCA RATON, FL 33431-4332	:	DATE 4/5/	2021
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