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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: 000 TUF LUV BA	IL BONDS, INC.		
DOCUMENT NUMBI	D14000010133			
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
		VERNON JONES	M. JR.	
_		Name of Contact Persor	1	
_		Firm/ Company		
	17891 S D	ixie Hwy STE 102		
		Address		
Palmetto Bay, FL 33157				
_		City/ State and Zip Code	2	
ר	uffluvbailbonds@gmail.cor	n		
_	E-mail address: (to be us	sed for future annual report	notification)	
For further information VERNON JONES M, J	concerning this matter, please.	se call: at ( <sup>786</sup>	426-1623	
Name of	Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	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)	
Amer Divis P.O. 1	ng Address Idment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

## Articles of Amendment to Articles of Incorporation of

000 TUFF LUV BAIL BONDS, INC.					
(Name o	of Corporation as curre	ntly filed with the Flor	rida Dept. of State)		
P14000018122					
	(Document Number	r of Corporation (if kno	wn)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	sis <i>Florida Profit Corpo</i>	oration adopts the following	g ameno	iment(s) to
A. If amending name, enter the new na 000 TUFF LUV ENTERPRISES, INC.	ame of the corporation:			The i	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corpo		n "Corp	p., "
B. Enter new principal office address,	if applicable:	N/A			
(Principal office address MUST BE A S				023	_
		at	- 1	PR	1
			, -	ယ	1
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A		<b>*</b>	
	<del></del>			ب	
		-		4	_
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent			r the name of the	_	
	(Florida	street address)		•	
New Registered Office Address:			, Florida		
		(City)	(Zip C	Code)	_
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familia			-	
	Signature of Iven	- кедіметей Адені, іј Ст	шпдшд		
Check if applicable  ☐ The amendment(s) is/are being filed p	ursuant to s. 607.0120 (1	1) (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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_	N/A	
Add				
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary). (Be specific)	
N/A	
	_
· · · · · · · · · · · · · · · · · · ·	
F. 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	
<del></del>	

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.	•	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirements, this dat partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder actio	n and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(sfficient for approval.	)
	roved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
3/27/2023 Dated		
Signature	Maran anes	
(By a di	rector, president or other officer - if directors or officers have not been	<del></del>
	, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
••	VERNON JONES M, JR.	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	