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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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Mexico Harry

COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: ELIZABETH PYZEOWSEA, INC
DOCUMENT NUMBER: 140000 24160
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Seminete Accountants Inc Firm/Company 9996 Seminele Blvel Address Seminale FL 33772-2535 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (127) 392-2/20 Area Code & Daytime Telephone Number
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:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ELIZA &	3ETH Y	17K0WSKA	INC
(Name of Corporatio	n as currently filed with th	he Florida Dept. of State)	
P14c	2416	, O	
(Docume	ent Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit	t Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the cor	rporation:		20 1
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the association, or the association, or the association, or the association association, or the association of the association o	" "Inc," or "Co". A profe abbreviation "P.A."		
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florid	a, enter the name of the	
Name of New Registered Agent			_
	(Florida street address)		_
New Registered Office Address:		, Florida	
	(City)	(Zip	Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.	stered Agent: I am familiar with and acce	pt the obligations of the position.	
		•	
Signa	ature of New Registered Age	ent, 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.

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) X Change	P	EL2	BIETA V	Vos D <u>YLA</u>	
Add					· · · · · · · · · · · · · · · · · · ·
Remove					
2) Change	······································			<u> </u>	
Add					
Remove					
3) Change			*** **********************************		
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Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove				,	
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)	Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		
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(y not applicable, maicale WA)	f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
	provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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The date of each amendment(s) adoption: 7 14 2016, if other than t date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
by" (voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 07/14/2016
Signature Gabula Punisla
(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)
ELZBIETA PYRKOWSKA (Typed or printed name of person signing)
PRESIDENT
(Title of person signing)