	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P	MAIL
	(Business Entity Name)	
	(Document Number)	
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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: HIGH FIVE SKATE GOARDS, INC DOCUMENT NUMBER: P14000028972
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alejande Romero Name of Contact Person High Five Skatchoards, INC Firm/Company 1775 Washington Au UNA 5"A" Address Mian: Beach Fwein 33139 City/State and Zip Code alejandarom & I Cloud. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alejandra Romero at 305 95H498 Name of Contact Person 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 Status Certified Copy Certificate of Status (Additional copy is enclosed) \$35 Filing Fee Status Certified Copy (Additional Copy is enclosed) \$35 Filing Fee 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 Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation

of

High Five Skateboards, IN	<u>ر</u>

(Name of Corporation as currently filed with the Florida Dept, of State)

P1400002897

(Document Number of Corporation (if known)

607 1006 Florida St e this Elavida Prafit Ca nt(s) to

name must be distinguishable and contain	the word "corporation," "comp	any," or "incorporated" or	The new the abbreviation "Corp.,"
"Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co". A pro	ofessional corporation name	ne must contain the word
B. Enter new principal office address, i (Principal office address <u>MUST BE A ST</u>	if applicable:	MA	2024
		<u> </u>	APR 15
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C		NI	AM 9: 3
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent		n Florida, enter the name	of the
New Registered Office Address:	(Florida street au	, 1	Torida 33139
	()		(1 14) (31)

Check if applicable

☐ 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 = Chie 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 Do	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>oneş</u>	
X Add	<u>sv</u>	Sally Si	mith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	D	_	Alejandra Romtes	315 Lincoln Rd Miam: Beach FL 3313°
✓ Add				
Remove				USA.
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change	-			
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

mending or adding additional Articles, enter change(s) here ach additional sheets, if necessary). (Be specific)	111
	/V \
<u> </u>	
n amendment provides for an exchange, reclassification, or	cancellation of issued shares
ovisions for implementing the amendment if not contained i	in the amendment itself:
(if not applicable, indicate N/A)	\mathcal{N} 1 \wedge
	NIA

	doption:		, if other than the
date this document was signed.			
Effective date if applicable:			
	(no more than 9	00 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D		cable statutory filing requirements, this date will	l not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were ad action was not required.	opted by the incorporators, or	board of directors without shareholder action and	l shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s		ne number of votes cast for the amendment(s)	
* *	•	rough voting groups. The following statement vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/we	ere sufficient for approval	
by	(voting group)		
	(voting group)		
Dated	101/2024		
Signature	director, president or other offi	cer ~ if directors or officers have not been ne hands of a receiver, trustee, or other court	
	ALEJANORA		
	(Typed or printed	name of person signing)	
	Director		
	(Title of person si	gning)	