P14000036029

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: DK'S STYLE HU	T KEYS INC.	
	UMBER: P14000036029		
	icles of Amendment and fee are su	ibmitted for filing.	
Please return all c	orrespondence concerning this ma	atter to the following:	
	Anthony J. Barrows		
	 -	Name of Contact Person	n
	Wright Barrows PLLC		
		Firm/ Company	
	9711 Overseas Highway		
		Address	<u> </u>
	Marathon, FL 33050		
		City/ State and Zip Cod	e
	kaimia@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further inforn	nation concerning this matter, plea	se call:	
Susan M. Lovley		305 at (743-8118) _
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a chec	ck for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fe	ce □\$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

DK'S STYLE HUT KEYS INC.

FILED

P14000036029	of Corporation as currently	y filed with the Florida Dept. of Stat	e) 2024 H.1Y -8
114000029	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	•	,	following amendme
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association."	Corp," "Inc," or "Co". A	company," or "incorporated" or the ab professional corporation name mus	The new obreviation "Corp' st contain the word
B. Enter new principal office address,	if applicable:	300 Sadowski Causeway	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	Key Colony Beach, FL 33051	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new registered a	OFFICE BOX) nd/or registered office addr w registered office address:		
Name of New Registered Agent	Maria Lynn Molek		
	300 Sadowski Causeway		
	(Florida stre		
New Registered Office Address	Key Colony Beach	, Florida	33051
		(City)	(Zip Code)
New Registered Agent's Signature, if call thereby accept the appointment as registered.	tered agent. I am familiar w		osition.
Check if applicable	<i>!</i>		

☐ 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)

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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Donna W. Kirchner	8347 Overseas Highway
Add			Marathon, FL 33050
X Remove			
2) Change	VP	Maria L. Molek	8347 Overseas Highway
Add			Marathon, FL 33050
X Remove 3) Change	PSTD	Maria Lynn Molek	P. O. Box 511571
X Add			Key Colony Beach, FL 33051
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	eets, if necessary).	icles, enter change (Be specific)			
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an amendment p	<u>covides for an excl</u> lementing the any	hange, reclassificated the control of the control o	tion, or cancellati	on of issued shares.	i.
(if not applicat	le, indicate N/A)	nument ii not com	tained in the ame	nument itsen.	
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The date of each amendment(s) adoption:
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 the document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
■ 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
(voting group)
Signature (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) Maria Lynn Molek
(Typed or printed name of person signing)
President
(Title of person signing)