## P14000058839

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S. ROBERTS

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: TSA'S BOOKBOOPING Services  DOCUMENT NUMBER: P14000058839						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Isanra Lindao						
Name of Contact Person						
ISA'S DUCKHCEPING Services Firm/Company						
1000 Brickell Ave #1000						
MIAMI FL 33131 City/ State and Zip Code						
ISQUE Q ISUS BOOKKETPING. COM E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
TSaura Lindao at (786) 222-009 (e) 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 Certificate of Status Certified Copy (Additional Copy is enclosed)  \$43.75 Filing Fee & Certificate of Status  Certified Copy (Additional Copy is enclosed)						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810						

Tallahassee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation

of

Isa's Ro	OKKErPING	Some	
(Name of Corporation as	currently filed with the Fl	orida Dept. of State)	
P1400005	7839		
	umber of Corporation (if ki	nown)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	ites, this <i>Florida Profit Cor</i>	poration adopts the follow	ing amendment(s
A. If amending name, enter the new name of the corpora			
Tro BOOKKEEPING SULV			The new
name must be distinguishable and contain the word "corpora "Inc.," or Co.," or the designation "Corp," "Inc," or ' "chartered," "professional association," or the abbreviation	"Co". A professional cor		
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRES</u> )	Σ)		20
	<del></del>		0
	<u> </u>		· · ·
C. Enter new mailing address, if applicable:			. <del></del>
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			-1
			<del></del>
			 பா
D. If amending the registered event and/ar registered of	Too address in Florida on	tor the name of the	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		der the name of the	
Name of New Registered Agent			
Name of New Negistered Agent	<del> </del>		_
	Florida street address)	<u> </u>	<del></del>
·	torina street daaressy		
New Registered Office Address:	(City)	, Florida	p Code)
	(0.9)	12.	, (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
New Registered Agent's Signature, if changing Registere			
I hereby accept the appointment as registered agent. I am f	lamiliar with and accept the	cobligations of the position	i.
Signature o	of New Registered Agent, if	changing	
Check if applicable			
☐ The amendment(s) is/are being filed pursuant to s. 607.03	120 (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 Do	e.	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	<u>Sally Sn</u>	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Address</u> s
1) Change		_		
Add				<del> </del>
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add		_		
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
				<del></del>
6) Change	<del></del>	_		
Add				
Remove				

	ticles, enter change(s) here: (Be specific)
<del>-</del>	
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

.

;

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
Enteriore date if applicable.	(no more than 90 days after amendment file date,	)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	pted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the am	nendment(s)
	roved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment	
"The number of votes cast i	for the amendment(s) was/were sufficient for approval	
by	1 "MYSEH" "	
	(voting group)	
Dated	15/2023	
Signature	(Saire)	
(By a di	rector, president or other officer - if directors or officers have	
	l, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	other court
<del>п</del> рропи		
	Isanra Lindau	
·	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	·····