4000061674

(Requestor's Name)
(Address)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CLEAR PALM,	INC		
DOCUMENT NUMI	BER:			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	ESTRELLA M FERNANDEZ			
	CLEAR PALM INC	Name of Contact Person	1	
		Firm/ Company		
	18489 N. HIGHWAY 41	#2470		
	LUTZ, FLORIDA 33548	Address		
		City/ State and Zip Code	2	
	ESTRELLA@AJGPAYROL	L.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
ESTRELLA M FER	n concerning this matter, pleas	se call: at (813	368-2772	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Please:			
	Please: Change	Name to	one word:	

((LEARPAIM IDC.)

Articles of Amendment to Articles of Incorporation of

CLEAR PALM, INC

FILED 2025 MAY - 1 PM 5:

(Name of Corporation as curren	tly filed with the Florida Dept. of State) 5:41
p14000061674	ANAL SE STATE
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
CLEARPALM, INC.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	2
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	555:
(Florida s	areet address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	
	1/9
Signature of New	Registered Agent, if changing
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)

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add		11,	
Remove 3) Change			
Add			<u>. </u>
Remove			<u>-</u>
4) Change	-		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets	additional Articles, enter change(s) here: s, if necessary). (Be specific)
(Much adamonal sheets	s, if necessary). (Be speedic)
	
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	W/
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F. If an amendment prov	rides for an exchange, reclassification, or cancellation of issued shares,
provisions for implen	nenting the amendment if not contained in the amendment itself: indicate N/A)
(if not applicable,	indicate N/A)
<u> </u>	
	10/

	05/01/2025	
The date of each amendment(s) adopt date this document was signed.	ion:	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will ment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted action was not required.	I by the incorporators, or board of directors without shareholder action and s	hareholder
■ The amendment(s) was/were adopted by the shareholders was/were suffice	by the shareholders. The number of votes cast for the amendment(s) tent for approval.	
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	7
by ESTRELLA M FERNAN	NDEZ TO	当工
· · · · · · · · · · · · · · · · · · ·	(voting group)	7 7
		- m
04/21/2025 Dated		, 3ª O
Signature		FILED SIN
selected, by	or, president or other officer if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)	· · ·
ES	TRELLA M FERNANDEZ	
	(Typed or printed name of person signing)	
VIO	CE PRESIDENT	
	(Title of person signing)	