## P1500001823

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: AlizaBlas Elik Enterprises
DOCUMENT NUMBER: P 150000 16823
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pennea Bus
Name of Contact Person
Aliza Bias Elite Enterprises
Firm/ Company
(ac walnut 84
Address
Aubundale Fl 32823
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ranney Bius at (813) 365-0594
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
Mailing Address Amendment Section  Street Address Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)	
Aliza Bios Elite Enterprises, Plscocolb823	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(its Articles of Incorporation:	(s) 1
A. If amending name, enter the new name of the corporation: NA	
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	・・・・・フ
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent TIMOTHY BLAS  606 Walnuts Street  (Florida street address)	
New Registered Office Address: Auburndale Florida 35803 (City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Begistered Agent. 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.

Example: XChange	<u> 19.1.</u> 1	John Doe	
X Remove	<u>V</u> <u>A</u>	Mike Jones	
_X Add	<u>SV</u> <u>S</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>D</u>	Timothy Blas	606 walnut St Auburrdale, Fl 33823
X Add			Auburdale +133823
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
Change			
Add			
Remove			
Change			
Add			
Remove			

	or adding additional Articles, enter change(s) here: ional sheets, if necessary). (Be specific)	
N	}	
<u> </u>	<u> </u>	
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f an ameno	ment provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment if not contained in the amendment itself:	
(if not	applicable, indicate N/A)	
	A/N	

The date of each amendment(s) adoption: Sept 6. 2018  date this document was signed.	, if other than the
Effective date if applicable: Sept 6, 208  (no more than 90 days after amendment file date)	<u> </u>
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
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)	
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.	
Dated9/6/18	
Signature During	
(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)	_
Rennea Bras	
(Typed or printed name of person signing)	
President	

(Title of person signing)