## P15000019951

(Requestor's Name)	
(Address)	
, ,	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
	$\overline{\Delta}$
Certified Copies	1
Special Instructions to Filing Officer:	

Office Use Only



000368876510

07/12/21--01032--001 \*\*52.50

2021 JUL 12 PM 2: 02

CCCCC

UE 12 PH 1:34

JUL 12 7021 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: T+ K Jones Inventions Inc.  DOCUMENT NUMBER: \$150000 19951
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person  STURY STUD COMPANY  Sog Paddock Club Dr.  Address  Parama City Beach FL. 32407  City/ State and Zip Code  Sturdy Stud Con, My 2028 Dangil. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sohm Mon Jones at 860, 322-9570  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 & Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## **COVER LETTER**

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: THE K Jones Inventions Inc.  DOCUMENT NUMBER: \$150000 19951
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person  STURDY STUD COMPAN  Afirm/ Company  Sog Haddock Club Da  Address  Address  City/ State and Zip Code  Stard & Stud Contact Person  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Johns Mon Jones at (860) 322-9570
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)  Certified 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
Tok Jones Inventions Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
\$15000 \text{1951}
(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(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:    Stund   Stund
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)
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
(Florida street address)
New Registered Office Address:, Florida
(City) (zap Cont)
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 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)

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 = 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 <math>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 Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			<del></del>
Remove			
2) Change			
Add			
Remove			<del></del>
3) Change		<del></del>	
Add			
Remove			
4) Change	<del></del>	<del></del>	W 900 · · · ·
Remove			<u>-</u>
5) Change			
Add			
Remove			
			·
6) Change			
Add			
Remove			

	dding additional Ar sheets, if necessary).	(Be specific)				
	,					
			·			<del></del>
· · · · · · · · · · · · · · · · · · ·					·· <u> </u>	
<u>-</u>		·				
				<del></del>		
	<del></del>				<u> </u>	
		<u> </u>	<del></del>			
					<u> </u>	
	<del> </del>	<del></del>	<del></del>		-	
					<del></del> -	
	t provides for an ex	change, reclassific	cation, or cancel	<u>lation of issued sh</u>	ares,	
an amenomen	mplementing the an	nendment if not c	ontained in the a	mendment itself:		
provisions for i						
provisions for i (if not appli	cunic, marcule may					
provisions for i	cubic, maicule 1477)					
provisions for i					<del></del>	
provisions for i						
provisions for i	Lune, maicule 1477					···-
provisions for i						
provisions for i						
provisions for i	Lune, maicale 1471					
provisions for in						
provisions for in	Lune, maicale (177)					
provisions for in	Lune, maicale 1971					
provisions for in	Lune, maicae may					
provisions for in	Lune, maicule 1177					

The date of each date this documen	amendment(s) adoption:, if other than the nt was signed.
Effective date <u>if</u>	applicable:  (no more than 90 days after amendment file date)
	inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the live date on the Department of State's records.
Adoption of Am	endment(s) ( <u>CHECK ONE</u> )
The amendme action was not	nt(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder required.
	nt(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) olders was/were sufficient for approval.
	nt(s) was/were approved by the shareholders through voting groups. The following statement rately provided for each voting group entitled to vote separately on the amendment(s):
"The nu	mber of votes cast for the amendment(s) was/were sufficient for approval
by	"
	(voting group)
	Dated
	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)
	(Typed of printed name of person againg)
	CEO Johnallan Jones
	(Title of person signing)