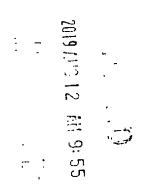
P15000034516

(Re	questor's Name)		
(Ad	dress)		
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(Cit	y/State/Zip/Phone		
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



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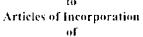
R WHITE ADD 14 200

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: ES KAVELL COP	₹P.		
DOCUMENT NUM	P15000033516			
The enclosed Article	s of Amendment and fee are so	ibmitted for filing.		
Please return all corr	espondence concerning this ma	itter to the following:		
	SHELLY ANN GRANT			
		Name of Contact Perso	n	
	ES KAVELL CORP.			
		Firm/ Company		
	8216 PRESTIGE COMMON	• •		
		Address		
	TAMARAC FL 33321			
		City/ State and Zip Cod	c	
shell	ly.grant@gmail.com			
	• -	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:at (301-0328	
Name	of Comact Person	at (Area Co) de & Daytime Telephone Number	
	or the following amount made			
■ \$35 Filing Fee	☐\$43.75 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		Amene	Address Iment Section	
	rision of Corporations), Box 6327	Division of Corporations		
	lahassee, F1, 32314	Clifton Building 2661 Executive Center Circle		
	•	Tallahassee, FL 32301		

Articles of Amendment to





2019 810 12 711 9:55

as currently filed with the Flori	da'Dent, of State)	-
Treatment of the control of the cont	I	
Number of Corporation (if know	m)	
atutes, this Florida Profit Corpo.	ration adopts the follow	ing amendment
oration:		
		The new
corporation." "company," or 'bic," or "Co". A professional reviation "P.A."	"incorporated" or the corporation name mus	abbreviation t contain the
<u></u>		
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office address in Florida, enter	the name of the	
<u>ce aduress;</u>		
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(*) (*) (*) (*) (*) (*) (*) (*)		_
(t turiaa xireet aagress)		
ıCityı	, Florida	o Coder
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Number of Corporation (if known atutes, this Florida Profit Corporation: corporation: corporation: ''company,'' or bue, '' or ''Co''. A professional reviation ''P.A.'' SSS)	Number of Corporation (if known) states, this Florida Profit Corporation adopts the follow eration: corporation: corporation: "company," or "incorporated" or the Inc," or "Co". A professional corporation name must reviation "P.A." SSS) office address in Florida, enter the name of the ce address:

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; V - Treasurer; S - Secretary; D - Director; TR - Trustee; C = Chairman or Clerk; CEO - Chief Evecutive 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	<u>PT 1.</u>	olin Doc	
X Remove	<u>V</u> <u>M</u>	like Jones	
X Add	<u>SV</u> <u>S</u> :	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	<u>v</u>	SEAN GRANT	8216 PRESTIGE COMMONS DR
Add			TAMARAC FL 33321
Remove			
2)Change	С.	SEAN GRANT	8216 PRESTIGE COMMONS DR
X Add			TAMARAC FL 33321
Remove			- · · · · · · · · · · · · · · · · · · ·
3 + Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheet	's, if necessary)	(Ве ѕресійс)				
N/A						
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	<u> </u>					
. If an amendment prov	ides for an exch	ange, reclassifica	tion, or cancella	tion of issued :	hares,	
provisions for implem (if not applicable,	indicate N/A)	<u>nament ir not con</u>	itained in the am	<u>enament itsell</u>	<u>:</u>	
EAN GRANT WILL NO		0% OWNER OF I	IS KAVELL COL	RP INSTEAD	SHELLY C GR	ΔNT
						AIN I
S 100% OWNER OF ES I	KAVELL CORP	, SEAN GRANT!	IS SIMPLY A CE	IAIR PERSON	ON THE CORPO	DRATION
						 -
						
-				 .		
·						
						
			·			_

	AUGUST 7, 2019	
The date of each amendment(s) ado	ption;	, if other than the
date this document was signed.	1077 7 3010	
Effective date <u>if applicable</u> :	JST 7, 2019	
	ino more than 90 days after amend	lment file date)
Note: If the date inserted in this blo document's effective date on the Depa		ig requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE)</u>	
The amendment(s) was/were adopt by the shareholders was were suff	ted by the shareholders. The number of votes of clent for approval.	ast for the amendment(s)
	oved by the shareholders through voting groups ach voting group entitled to vote separately on	
"The number of votes east fo	r the amendment(s) was/were sufficient for app	roval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder ac	tion and shareholder
selected.	etor, president or other officer – infirectors or by an incorporator – if in the hands of a receiv I fiduciary by that fiduciary)	
_	Shelly Am G	ring)
_	President (Title of person signing)	