P15000053420

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	PRATION: ROSESPAN, INC	,		
DOCUMENT NUM	P15000053420			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Lilisbet Ahneida			
		Name of Contact Person	n	
	Rosespan, Inc.			
		Firm/ Company		
	3810 W. Linebaugh Ave.			
		Address		
	Tampa, FLL 33618			
		City/ State and Zip Cod	e	
	baycityautosales909@gmail.	com		
		sed for future annual report	notification)	
For further informati	on concerning this matter, plea		956-7465	
Name of Contact Person		at (Area Co) 956-7465 de & Daytime Telephone Number	
	for the following amount made			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Address	
Amendment Section		Amendment Section Division of Corporations		
Division of Corporations P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ROSESPAN, INC.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P15000053420	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co". Inc., " or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	T Z Z Z T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	TO PH 2: 59
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et 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 familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered 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 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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Adđ			ASSEE. F
Remove			
4) Change			W24 PM 2: 59
Add			<u></u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

rticle IV	
he number of shares the corporation is authorized to issue is:	
000 non-voting	
0 voting	
- w 	
	_
	- F. 3 T
	2 7
	S.S. 7
	<u>\$</u>
	*
If an amendment provides for an exchange, reclassification, or cancellation of issued sha	ares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
M/A	

S. C. B. C. B. C.		
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will no partment of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adoption was not required.	oted by the incorporators, or board of directors without shareholder action and sh	areholder
■ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
must be separately provided for e	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	-11
	TO '	12 F
by	(voting group)	2 M
May 13, 202 Dated	ري شم	2: 59
Signature	elegi	
selected,	ector president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court of fiduciary by that fiduciary)	
1	Lilisbet Almeida	
_	(Typed or printed name of person signing)	
I	President/Director	