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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | RATION: MY STORYBOO | K PARTY, INC. | | |
|--|---|--|--|--|
| DOCUMENT NUMI | | | | |
| The enclosed Articles | of Amendment and fee are st | ibmitted for filing. | | |
| Please return all corres | spondence concerning this ma | atter to the following: | | |
| | PRISCILA BATISTA RADI | KE GAIDO | | |
| | | Name of Contact Person | n | |
| | | Firm/ Company | | |
| | 2570 ROYAL JASMINE CT | • | | |
| | CLERMONT, FL 34711 | Address | | |
| | | City/ State and Zip Cod | e | |
| | GAIDORADKE@GMAIL.C | COM | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| For further information | n concerning this matter, plea | se call: | | |
| PRISCILA B RADKE | E GAIDO | 941 at (| de & Daytime Telephone Number | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment of State: | |
| ■ \$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 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

Articles of Amendment to Articles of Incorporation \mathbf{of}

| MY STORYBOOK PARTY, INC. | | |
|--|---|---|
| | rrently filed with the Florida Dept. of Sta | <u>itc</u>) |
| 215000096820 (Document Star | mber of Corporation (if known) | - |
| | · | - 6.11 |
| Pursuant to the provisions of section 607.1006, Florida Statute ts Articles of Incorporation: | s. this <i>Ptorida Profit Corporation</i> adopts th | e following amendment(s |
| A. If amending name, enter the new name of the corporati | ion: | |
| GAIDO ENTERPRISES INC | | The new |
| ame must be distinguishable and contain the word "corporatio" lnc.," or Co.," or the designation "Corp," "Inc," or "C chartered," "professional association," or the abbreviation | lo". A professional corporation name m | ubbreviation "Corp.," ust contain the word |
| B. Enter new principal office address, if applicable: | | |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | | 2 |
| | - | 23. |
| | | 1 - 2 |
| Enter new mailing address, if applicable: | | · > |
| (Mailing address MAY BE A POST OFFICE BOX) | | 2 |
| | | . |
| | | - |
| | | <u>, n</u> |
| If amending the registered agent and/or registered office new registered agent and/or the new registered office ac | | <u>1e</u> |
| new registered agent and/or the new registered office at | <u> </u> | |
| Name of New Registered Agent | | |
| | | |
| (Flo | rida street address) | |
| New Registered Office Address: | , Florid | a |
| | (City) | (Zip Code) |
| | | |
| au Dagistared Agent's Signature if shanging Desistared | Agenti | |
| ew Registered Agent's Signature, if changing Registered . hereby accept the appointment as registered agent. I am fan | | position. |
| | , , , , | , |
| | | |
| | | |
| Signature of i | New Registered Agent, if changing | |
| heck if applicable | | |

☐ The amendment(s) is/are being tiled pursuant to s. 607.0120 (11) (c), 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 Doc | | |
|-------------------------------|--------------|--------------|---|----------------|
| X Remove | <u>V</u> | Mike Jones | | |
| X Add | <u>SV</u> | Sally Smith | | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | | <u>Address</u> |
| 1) Change | - | | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove 3) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | · |
| Remove | | | | |
| 5) Change | | - | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | - | | |
| Add | | | · | |
| Remove | | | | |

| Attach additional sheets, if necessary). | ticles, enter change(s) here: (Be specific) | |
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| f an amendment provides for an exch | hange, reclassification, or cancellation of issued shares, | |
| provisions for implementing the ame- | endment if not contained in the amendment itself: | |
| (if not applicable, indicate N/4) | | |
| (if not applicable, indicate N/A) | | |
| (if not applicable, indicate N/A) | | |
| (if not applicable, indicate N/A) | | |
| (if not applicable, indicate N/A) | | |
| (if not applicable, indicate N/A) | | |
| (if not applicable, indicate N/A) | | |
| (if not applicable, indicate N/A) | | |
| (if not applicable, indicate N/A) | | |
| (if not applicable, indicate N/A) | | |

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| The date of each amendment(s) adoption:, if other than the date this document was signed. |
|--|
| |
| Effective date if applicable: (no more than 90) days after amendment file date) |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. |
| Adoption of Amendment(s) (CHECK ONE) |
| ■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. |
| ☐ 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) |
| JULY 3RD 2023 Dated |
| SignaturePrisala = (4/45)+do (1013, 2022 16 05 +03) |
| (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) |
| PRISCILA BATISTA RADKE GAIDO |
| (Typed or printed name of person signing) |
| PRESIDENT |

(Title of person signing)