P16000014032

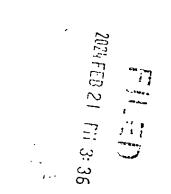
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: EOM 18, INC.		
DOCUMENT NUM	P16000014032		
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	Ohad Einhorn		
		Name of Contact Perso	n
		Firm/ Company	
	260 95th Street Suite 210		
		Address	
	Surfside, FL 33154		
	-	City/ State and Zip Cod	e
	ohadein@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Ohad Einhorn		at (3383028
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐S43.75 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		Amend Divisio	Address Iment Section In of Corporations Entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

EON 18 INC

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

FILED

EUM 18, INC.		• •	- T. I. T
(Name o	of Corporation as currently	filed with the Florida-Deptof-Sta	<u>lte</u>) Pi; 3: 36
P16000014032			
	(Document Number of	Corporation (if known): .	70
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, this F	Iorida Profit Corporation adopts the	e following amendment(s) to
A. If amending name, enter the new national EINHORN, INC.	ame of the corporation:		
		<u> </u>	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Torp," "Inc," or "Co". A	impany," or "incorporated" or the a professional corporation name m	bbreviation "Corp" ust contain the word
B. Enter new principal office address,	if annlicable:	N/A	
(Principal office address MUST BE A S			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
			
D. If amending the registered agent an		ss in Florida, enter the name of th	<u>ie</u>
new registered agent and/or the new	w registered office address:		
Name of New Registered Agent	N/A 		
	(Florida stree	et address)	
New Registered Office Address:	N/A	. Florid	N/A a
www.negimered.combet.near.com.	(0	City)	(Zip Code)
New Registered Agent's Signature, if c			
I hereby accept the appointment as regist	ered agent. – Lam familiar wi	th and accept the obligations of the	position.
			
	Signature of New Reg	gistered Agent, if changing	
Charle if applicable			
Check if applicable			

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: X Change	<u>PT</u>	John Doe	
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>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	nal sheets, if nec	essary). (Be sp	ter change(s) here pecific)			
/A						
				*		
			-			
<u>-</u>			· · · · · ·		· · · · · · · · · · · · · · · · · · ·	
		<u> </u>				
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 				<u></u>		
If an amendme	ent provides for	an exchange, re	eclassification, or	cancellation of issu	ed shares,	
provisions for	implementing	the amendment NA)	if not contained in	n the amendment it	<u>self:</u>	
(ŋ noi app 'A	ncame, marcare	· N/A)				
			<u> </u>			

January 1, 2024	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
January 1, 2024	
Effective date if applicable:	or I i
(no more than 90 days after amendment	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requocument's effective date on the Department of State's records.	uirements, this date will not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without action was not required.	it shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast fo by the shareholders was/were sufficient for approval.	r the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the an	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
February 16, 2024 Dated	
Signature (By a director, president or other officer – if directors or office selected, by an incorporator – if in the hands of a receiver, true appointed fiduciary by that fiduciary)	
OHAD EINHORN	
(Typed or printed name of person signing)	
PSTD	
(Title of person signing)	