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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: | Forever # | Art + Mirro | rs, I | 7c | |
|--|---------------------------------|---|-----------|--|----|
| DOCUMENT NUMBER: <u>//</u> | | | | | |
| The enclosed Articles of Amendme | ent and fee are su | bmitted for filing. | | | |
| Please return all correspondence co | ncerning this ma | atter to the followin | g: | | |
| | Roth Ko | osler | | | |
| | 150110 10 | Name of Contac | ct Person | | - |
| En- | ever ART | + + Mirrors | 5. Zn | <i>c.</i> | |
| | 200, 7 | Firm/ Com | pany | <u> </u> | |
| 200 | 1 NW 15 | Firm/ Comp Firm/ Comp Address | # 10 | 7 | |
| | <u></u> | Address | s | <u> </u> | _ |
| Por | npano Bo | City/ State and | 3306 | 9 | |
| | -/ | City/ State and | Zip Code | | _ |
| 1 | | rortand m | | | |
| | | sed for future annua | | | |
| | • | | • | | |
| For further information concerning | this matter, plea | se call: | | | |
| 1 | | | | | |
| Beth Kesler | | at (| 954 |) 448 · 339/ e & Daytime Telephone Numb | |
| Name of Contact Pe | rson | • | Area Cod | e & Daytime Telephone Numb | er |
| Enclosed is a check for the following | ng amount made | payable to the Flor | ida Depa | rtment of State: | |
| ☑ \$35 Filing Fee ☑\$43.7 Centif | 75 Filing Fee & icate of Status | S43.75 Filing Certified Copy (Additional copenclosed) | y | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Mailing Address | | | Street A | | |
| Amendment Section Division of Corporations | | Amendment Section 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

| Forever ARt 4 Mirrors, Inc. (Name of Corporation as currently file | | |
|--|--|------------------------------------|
| (Name of Corporation as currently fil | led with the Florida Dept. of State) | |
| P6+000 P16000359 | 160 | |
| (Document Number of Co | orporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation: | rida Profit Corporation adopts the follo | owing amendment(s) to |
| A. If amending name, enter the new name of the corporation: | | |
| π/A | | The new |
| name must be distinguishable and contain the word "corporation," "comporation," or "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A proceed," "professional association," or the abbreviation "P.A." | pany," or "incorporated" or the abbrev cofessional corporation name must co | niation "Corp.," ntain the word |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | M/A | |
| - - | | ••3 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | n/a | • |
| _ | | 1 |
| | | <u> </u> |
| D. If amending the registered agent and/or registered office address | in Florida, enter the name of the | <u>ئ</u> |
| new registered agent and/or the new registered office address: | | در ند. |
| Name of New Registered Agent | | - |
| (Florida street o | addraye) | |
| nla | | |
| New Registered Office Address: 11 / (Cit. | , Florida | Zip Code) |
| 1-7 | | |
| 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 positi | on. |
| N/A Signature of New Regis | | |
| Signature of New Regis | tered Agent, if changing | - |
| Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), | | |

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 | PT | John Doe | |
|----------------------------|--------------|-------------|---------------------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Şally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | | Frank Perez | 2001 NW 15th Ave |
| Add Remove | | | Suite #107 Pompano Beach, FL 33069 |
| 2) Change Add | | | |
| Remove 3) Change | | | |
| Add Remove 4) Change Add | | | |
| Add Remove 5) Change Add | <u></u> | | |
| Remove 6) Change Add | | | |
| Remove | | | |

| amending or adding additional Articutach additional sheets, if necessary). | (Be specific) | | | |
|--|------------------------|---------------------------------------|-------------------|-----|
| 7/A | | <u> </u> | | |
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| an amendment provides for an exch | ange, reclassification | on, or cancellation | of issued shares, | |
| orovisions for implementing the ame (if not applicable, indicate N/A) | ndment if not conta | ined in the amend | ment itself: | |
| | | | | |
| 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: $\frac{3/28/20}{}$ | |
| Effective date if applicable: $\frac{3/28/20}{\text{(no more than 90 days after an)}}$ | nendment file date) |
| Note: If the date inserted in this block does not meet the applicable statutory 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 direct action was not required. | ors without shareholder action and shareholder |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of vo by the shareholders was/were sufficient for approval. | ites cast for the amendment(s) |
| The amendment(s) was/were approved by the shareholders through voting gr must be separately provided for each voting group entitled to vote separately | • |
| "The number of votes cast for the amendment(s) was/were sufficient fo | r approval |
| by | |
| (voting group) | |
| Dated 12/28/2020 Signature Bath Keeler | |
| (By a director, president or other officer – if director selected, by an incorporator – if in the hands of a re appointed fiduciary by that fiduciary) | ceiver, trustee, or other court |
| Beth Kesler (Typed or printed name of person | |
| (Typed or printed name of person | n signing) |
| President / Owner (Title of person signing) | |
| (Title of person signing) | |

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