PIUCOSIL

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800351879568

03/14/20--01021--020 ++35.00

T. 1:46

LALBRIT ON

COVER LETTER

		
TO: Amendment Section Division of Corporations		
NAME OF CORPORATION:	ANZABO	CE IN C
DOCUMENT NUMBER:	P 160	3000 39290
The enclosed Articles of Amendment and fee are su	omitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	. 1
<u>Ste</u>	ue B	lazekovic
A	Name of Contact Person ANTARCE	7 14 6
	Firm/ Company	
1743	l Sana	dy Circle
Cape Cor	Address	C 33904,
S+Q V E-mail address: (10 be us	City/ State and Zip Code Code	KOVIC Q Yahoo, con
For further information concerning this matter, please	se call:	•
Name of Contact Person	at () Area Code &	E Daytime Telephone Number
Englosed is a check for the following amount made	nayable to the Florida Departme	ent of State:
S35 Filing Fee	Certified Copy (Additional copy is enclosed)	B\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section	<u>Street Add:</u> Amendmen	

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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	
Articles of Interpretation of	
Accarable luc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P16 0000 39290	
(Document Number of Corporation (if known)	
tursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following ames Articles of Incorporation:	:ndment(s) to
a. If amending name, enter the new name of the corporation:	
	new
ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "C Inc.," or Co" or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the chartered," "professional association," or the abbreviation "P.A."	orp.," word
Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	~
	020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	-
	 . ·
	<u> </u>
 If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address; 	
	46
Name of New Registered Agent	
Clauda con address	
(Florida street address)	
New Registered Office Address: Florida (City) (Zip Code)	
(all)	
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
πετεύ, ακτέρι της αργοπημήτης αν τεξινικέτα άξετη. Τα πημημήτη από ακτέρι της συμξαποία ομ με μονίπου.	
Signature of New Registered Agent, if changing	
Signature tij New Registerea Agent, y 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)

Please note the officer/director tule 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	Y Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One) Change Add	VP Christin Blazeleovic	1742 Saudy Cape Coval FL
Remove 2) Change		
Add Remove 3) Change		
Add Remove 4) Change Add		
Remove Change Add		
Remove 6) Change Add		
Remove		

about:blank

Firefox

f amending or adding additional Arti Much additional sheets, if necessary).	(Be specific)			
				
	· · · · · · · · · · · · · · · · · · ·			
	*			
				
f an amendment provides for an excl	innge, reclassification, or	cancellation of issued	1 slorr <u>es,</u>	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained i	a the amendment its	elf:	
(tj not appricable, matetile (97A)				
			<u> </u>	
	·			

date this document was signed.	
Effective date <u>if applicable</u> :	·····
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
☐ 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'''	
Dated 9/9/2020 Signature	leyek
(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) Steve B	lazekour
(Typed or printed name of person signing)	
(Title of person signing)	