## P16 0000048670

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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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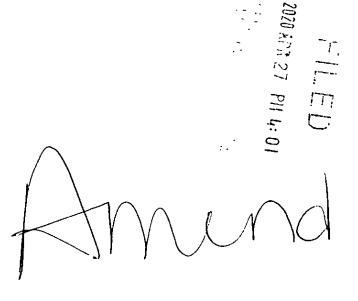
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FORMED ARREST 27 200



MAY 1 1 2020 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ration: NO-	-1-U-NO	INC
	BER: P16000		
The enclosed Articles	of Amendment and fee are s	submitted for filing.	
Please return all corre	spondence concerning this π	natter to the following:	
	NO-1-1 PO BO	Firm/ Company  CX 757  Address  VEDRA BEAC  City/ State and Zip Coc	h Florida 32004
	E-mail address: (to be u	sed for future annual report	NET thotification)
For further information	concerning this matter, plea	se calt:	
WAINE T	ANYAS	at ( 904	
Name o	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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi	ng Address dment Section on of Corporations 30x 6327	Amend Division	Address ment Section n of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

NO-1-U-NO INC

(Name of Corpora	tion as currently filed with the F	lorida Dept, of State)	<del></del>
	P16000048670		
(Docu	ment Number of Corporation (if k	(nown)	
Pursuant to the provisions of section 607.1006, Floring Articles of Incorporation:	da Statutes, this <i>Florida Profit Co</i>	rporation adopts the follow	wing amendment(s
A. If amending name, enter the new name of the	corporation:		
		<del></del>	The new
name must be distinguishable and contain the word "o "Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb	"," or "Co". A professional coi	orporated" or the abbrevi poration name must con	ation "Corp.," tain the word
Enter new principal office address, if applicable			
Principal office address <u>MUST BE A STREET AD</u>	DRESS )		L2
		2.3	120
	<del></del>		77
. Enter new mailing address, if applicable:		: • *	[2]
(Mailing address MAY BE A POST OFFICE BO	<u></u>		<del></del>
	<u> </u>		三三
	<del></del>		<del> </del>
<ul> <li>If amending the registered agent and/or registered new registered agent and/or the new registered</li> </ul>	red office address in Florida, en office address:	ter the name of the	
	· · · · · · · · · · · · · · · · · · ·		
Name of New Registered Agent	<del></del>		<del></del>
	271 14	<del></del>	
	(Florida street address)		
New Registered Office Address:	(City)	, Florida	C 11
	(City)	(21)	p Code)
ew Registered Agent's Signature, if changing Reg	sistered Agent:		
ereby accept the appointment as registered agent.	I am familiar with and accept the	obligations of the position	ı <b>.</b>
	•		
	atura of Nau Pool-town J. 4 'C.	<u> </u>	
Signa	ature of New Registered Agent, if c	cnanging	
heck 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 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> <u>Joh</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
<u>X</u> Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	NANCY BURGIN	1919 SPRUCE CREEK CIR
X_ Add		/	PORT ORANGE FL 32128
Remove			
2) Change	5_	FRANCES KING	1070 CASTAWAY COVER
_ <b></b> Add			DAyrona Bench FL 32124
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove	•	•	,
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional	dding additional Art sheets, if necessary).	(Be specific)	-147 1104 0			
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	***				<u> </u>	_
an amendment p	rovides for an excha	inge, reclassificat	ion, or cancellati	on of issued share	S,	
<u>rovisions for imp</u>	olementing the amen	dment if not con-	tained in the ame	ndment itself:		
(if not applicat	ble, indicate N/A)					
<del></del>						
<del>-</del>				<del></del> -		
	<del></del>		<u>.</u>			<del></del>
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			<del></del>	<del></del>	·	

The date of each amendment(s) ado date this document was signed.	otion:	, if other than the
Effective date if applicable:		
Enterive date it applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirement. rtment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffice.	d by the shareholders. The number of votes cast for the ame ient for approval.	endment(s)
☐ The amendment(s) was/were approving must be separately provided for each	ed by the shareholders through voting groups. The following the voting group entitled to vote separately on the amendment	z statement (s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected, by	or, president or other officer – if directors or officers have not an incorporator if in the hands of a receiver, trustee, or other	ot been her court
appointed f	iduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of pc/son signing)	
	PRESIDENT	
	(Title of person signing)	