P16000067309

(Re	questor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #î
(,,	,
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(DC	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400355846024

12/15/20--01013--004 **35.00

2033 ET 215 AN 10:47

Ancod

JAN 3 1 2021 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THOY HE Day (ave + Leaking Corp
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Firm/ Company
2434 W. 60St
Halvah FL 33016 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Hult Loyet / While Kiles Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amandment Section

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

Tito	K Lip Da	Wate +	Legicina	CORP
(Name of Co	rporation as currentl	y filed with the Florid	la Dept. of State)	~
\$160C	2067369			
	(Document Number o	f Corporation (if know	n)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this	Florida Profit Corport	ution adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of	of the corporation:			
				The new
name must be distinguishable and contain the w "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or th	" "Inc," or "Co". A	1 professional corpora	rated" or the abbrevious tion name must con	ition "Corp.," tain the word
B. Enter new principal office address, if app (Principal office address MUST BE A STREE				
				~
		 		<u></u>
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)				0
(maning data ess <u>man be a rost or r</u>	rele boxy			 ;
			 	<u> </u>
		<u>.</u>		
D. If amending the registered agent and/or	registered office addi	ress in Florida, enter :	the name of the	- Barrier 19
new registered agent and/or the new reg				
Name of New Registered Agent	VAlerie	Yulles		$\overline{\alpha}$
	2134	1) Cost		
	(Florida str	eet address)		
New Registered Office Address:	Hio	leah	Florida3	3ΘÏφ 🖳
Hen Registerea Office Address.	(10)	(City)	(Z.	ip Code)
w Registered Agent's Signature, if change ereby accept the appointment as registered			igations of the positio	n.
,,	VR	,	3 Sj. 11.2 p. 2	
	Signature of New R	egistered Agent, if cha	 nging	

ck if applicable he amendment(s) is/are being filed 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)

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 Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One) 1) Change Add	Title	Name LUIS LOPICE	7843 NW 1725+ Hial confl 33015
Remove 2) Change Add	P	VALERIE Pulles	2434 W 60S+ Highealy Fl33016
Remove Change Add			
Remove 4) Change Add		_	
Remove 5) Change Add			
Remove 5) Change Add Remove			

. <u>11 ameno</u> (Attach <i>a</i>	ling or adding add dditional sheets, if r	ngonal Articles, pecessary). — (Be	enter change e specific)	(<u>s) nere</u> :			
	<u> </u>			·			
					•		
				<u></u>			
		_					
		_					
	· · · ·						
.	·						
		···	<u>.</u>				
				<u> </u>			
						· · · · · ·	
							_
					· · · - · · - · · · · · · · · · ·		
<u>If an am</u>	endment provides	for an exchange	e, reclassificat	ion, or cancella	ation of issued	shares,	
<u>provisio</u> (if)	ons for implementi not applicable, indic	ng the amendm	ent if not con	tained in the ar	nendment itsel	<u>if:</u>	
ζ,		,					
							
							
•				 			
			- <u> </u>				
							
		•			-		
							

.

The date of each amedate this document wa	
Effective date <u>if appl</u>	cable:
	(no more than 90 days after amendment file date)
	rted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ate on the Department of State's records.
Adoption of Amendr	ent(s) (CHECK ONE)
The amendment(s) action was not requ	was/were adopted by the incorporators, or board of directors without shareholder action and shareholder red.
	was/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
	was/were approved by the shareholders through voting groups. The following statement 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)
Dat	12/10/20
Sign	ature Di.
	(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)
	Luis Lopet
	(Typed or printed name of person signing)
	President
	(Title of person signing)