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| Certified Copies        | Certificates       | s of Status |
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| Special Instructions to | Filing Officer:    |             |
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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

| NAME OF CORPORATION: 18K Services and More Inc  |  |  |  |  |
|---|--|--|--|--|
| DOCUMENT NUMBER: P160.000.8142.6  |  |  |  |  |
| 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  BSG Financial Fortners Inc  Firm/Company  |  |  |  |  |
| 312 Sold Dixie Husy # 109 Address   |  |  |  |  |
| Octy/ State and Zip Code  |  |  |  |  |
| E-mail address (to be used for future annual report notification)   |  |  |  |  |
| For further information concerning this matter, please call:  |  |  |  |  |
| Diana Velasourz at (561, 5294923  |  |  |  |  |
| 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)  S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)   |  |  |  |  |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle |  |  |  |  |

Tallahassee, FL 32301

## Articles of Amendment to

## Articles of Incorporation

of

| JSK Services and   | More Inc   |
|--|--|
|  | ly filed with the Florida Dept. of State)                    |
| P1600008   | 31426  |
| (Document Number o   | f Corporation (if known)                                     |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:  | Florida Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the corporation:  |  |
| NIA.   | The new  |
| name must be distinguishable and contain the word "corporatio<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "<br>word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the       |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | N/A.   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | N(A.   |
| D. If amending the registered agent and/or registered office add<br>new registered agent and/or the new registered office address  |  |
| Name of New Registered Agent ~ ~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   | <u> </u>   |
| (Florida str<br>New Registered Office Address:   | rcet address)  |
|  | (City) *:, * (Zip Code)                                      |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to   |  |
| Signature of New F   | Registered Agent, if changing                                |

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 Joh              | hn Doe                       |                                      |
| X Remove                   | <u>V</u> <u>Mi</u>  | ike Jones                    |                                      |
| X Add                      | <u>SV</u> <u>Sa</u> | ally Smith                   |                                      |
| Type of Action (Check One) | <u>Title</u>        | <u>Name</u>                  | Address                              |
| 1) Change                  | Officer             | Cruz Maria<br>Glodys Enedina | 1200 Chickasow &<br>Jupiter Fl 33458 |
| Add                        |                     | Cloads Cheand                | Jupiter 71 33408                     |
| X Remove                   |                     |                              | <del></del>                          |
| 2) Change                  |                     |                              |                                      |
| Add                        |                     |                              |                                      |
| Remove                     |                     |                              |                                      |
| 3 ) Change                 |                     | <del></del>                  | <del>_</del>                         |
| Add                        |                     |                              |                                      |
| Remove                     |                     |                              | NE 19 JUN F                          |
| 4) Change                  |                     | <del></del>                  |                                      |
| Add                        |                     |                              |                                      |
| Remove                     |                     |                              | - 10.00 D                            |
| 5) Change                  |                     |                              |                                      |
| Add                        |                     |                              |                                      |
| Remove                     |                     |                              | <del></del>                          |
| 6) Change                  |                     |                              |                                      |
| Add                        |                     |                              |                                      |
| Remove                     |                     |                              |                                      |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)  |                     |
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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:   | ंश्चर<br>सिक्षा     |
| (if not applicable, indicate N/A)  | 7                   |
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| The date of each amendment(s) adoption: O'I O O I O O I O O O O O O O O O O O O  | , if other than the |
|--|---------------------|
| Effective date if applicable:  Or 109 19  (no more than 90 days after amendment file date)   | <del></del>         |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n document's effective date on the Department of State's records.                      | ot be listed as the |
| Adoption of Amendment(s) (CHECK ONE)   |                     |
| 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   |                     |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  |                     |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |                     |
| Dated 4 9 19   |                     |
| Signature (by a director, president or other officer – if directors or officers have not been  | ر او ا              |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)   |                     |
| Ramirez Tuan   | ω ;<br>≥> ∏         |
| (Typed or printed name of person signing)  |                     |
| President.   | မေ<br>တ             |
| (Title of person signing)  | <del></del>         |