P16 000083628

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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DEC 12 SOSI

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Ironhide Seating Sc	olutions, Inc.	
	IBER:		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Michael Pagano III		
		Name of Contact Person	1
	Ironhide Seating Solutions, Ir	ic.	
		Firm/ Company	<u>, </u>
	3340 Gulfbreeze Terrace		
		Address	
	Palm Harbor, Florida 34684		
	-	City/ State and Zip Cod	e
	admin@ironhideseating.com		
	E-mail address: (to be us	sed for future annual report	notification)
		,,	
For further informat	on concerning this matter, pleas	se call:	
Michael Pagano III		727 at (858*0584
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ai Di P.	ailing Address nendment Section vision of Corporations O. Box 6327 dlahassee, FL 32314	Amend Division The C 2415 i	Address Ilment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, F1, 32303

Articles of Amendment to Articles of Incorporation of

Ironhide	Seating	So	lutions,	Inc.
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(Name o	of Corporation as current	ly filed with the Florida Dept. of State)	
P16000083628			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	ame of the corporation:		
Ironhide Seating Restoration, Inc.		The new	
	lorp," "Inc," or "Co".	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address,	if applicable:	3340 Gulfbreeze Terrace	
(Principal office address MUST BE A S		Palm Harbor, Florida 34684	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 2451	
		Oldsmar, Florida 34677	
D. If amending the registered agent ar new registered agent and/or the new			
Name of New Registered Agent	Michael Pagano III		
	3340 Gulfbreeze Terrace	2	
	(Florida s	reet address)	
New Registered Office Address:	Palm Harbor	, Florida 34684 —	
		(City) (Zip Code) (Time in the control of the contr	
New Registered Agent's Signature, if c	hanging Registered Agen	<u>u</u> 2	
I hereby accept the appointment as regist	tered agent. I am familiar	with and accept the obligations of the position.	
	Cla		
	Signature of New .	Registered Agent, if 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 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:	, 147114 (7681)	y amin, ar as an maa.	
X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			/
Add			
Remove			
2) Change			
Add		.'	
Remove 3) Change			
Add			· · ·
Remove			
4) Change			
Add		,	
Remove		,	
5) Change		_ /	
Add			
Remove			
6) Change		7′ ———	
Add		,	
Remove			

mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)	
	
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	n e e a a
in amendment provides for an exchange, reclassification, or ca	incenation of issued shares, the amendment itself:
ovisions for implementing the amendment if not contained in (if not applicable, indicate N/A)'	
/	
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The date of each amendment(s) ad date this document was signed.	11/24/21 option:, if other than the
11/24	/21
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes east for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by incorporators	
	(voting group)
11/24/21	
Dated	
0'	
selected	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diductary by that fiductary)
	Michael Pagano III
	(Typed or printed name of person signing)
	President
•	(Title of person signing)