## P17000009097

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SECRETARY OF STATE

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## COVER\_LETTER

TO: Amendment Section

Division of Corporations NEW YORK CUTS BY TOSH P17000009097 NAME OF CORPORATION: 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 E-mail address: (to be dsed for future annual report notification) For further information concerning this matter, please call: MICHELLE MARIENA 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: \$35 Filing Fee **□\$**43.75 Filing Fee & **□\$**43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment

to Articles of Incorporation of				ANG ZO PLO		
(Name	of Corporat	ion as curre	ntly filed	with the F	lorida Dept. o	of State)
EW	YURK	CUTS	BY	TOSH	INC	"Solo 109
	(Docu	ment Numbe	r of Corpo	oration (if k	nown)	

ent(s) to

NEW YURK

A. If amending name, enter the new	SIGNATURE		INC		The ne
name must be distinguishable and c "Corp.," "Inc.," or Co.," or the des word "chartered," "professional asso	contain the word "co signation "Corp," "In	rporation," "co c," or "Co". A viation "P.A."	mpany," or profession	al corporation na	or the abbreviation me must contain th
B. <u>Enter new principal office addre</u> (Principal office address <u>MUST BE</u>		<i>[</i>	<u>(6/9 /6)</u> Jupi	sompd N TER, FL	-
				37418	
C. Enter new mailing address, if ap (Mailing address <u>MAY BE A POS</u>			( SA	ME)	
D. If amending the registered agent			lorida, ente	er the name of the	2
D. If amending the registered agent new registered agent and/or the Name of New Registered Age	new registered office	address:	FAU		
new registered agent and/or the	new registered office	address:  JUNE  19 /65**	FAU Rd N		

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	n Doe	
X Remove	<u>V</u> <u>Mil</u>	se Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PIST	TASHAJUNEAU	11619 /65th PU.N.
Add Remove			Jupitu, FL 33478
2) Change	<u> </u>	TOSH JUNEAU	11619 165° N. 1 18 Jupiter, FL
Remove 3)Change			33478
Add			
4) Change Add Remove			
5) Change Add	<del></del>		
Remove 6) Change Add	<del></del>		
Remove			

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an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
an amendment provides for an exch rovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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The date of each amendment(s) ad	option:			, it other than the
date this document was signed.	•	00000	(AXA)	
Effective date if applicable:		23 2018	···	
	(no n	iore than 90 days after a	menament file date)	
Note: If the date inserted in this bedocument's effective date on the De			filing requirements, this date wi	Il not be listed as the
Adoption of Amendment(s)	(CHECK C	<u>ONE</u> )		
The amendment(s) was/were add by the shareholders was/were su			otes cast for the amendment(s)	
☐ The amendment(s) was/were app must be separately provided for				
"The number of votes cast	for the amendment	(s) was/were sufficient fo	r approval	
by	(voting gro	pup)		
☐ The amendment(s) was/were ado action was not required.			holder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorpo	orators without shareholds	er action and shareholder	
Dated AU	TUST 22M	2018		
Signature				
selected	rector, president or l, by an incorporate ed fiduciary by tha	or – if in the hands of a re	rs or officers have not been eceiver, trustee, or other court	- <del>-</del>
	1	OSH JU	INEAU	
	(Typed	or printed name of persor	n signing)	
		PRESIDENT Title of person signi	ナ	
		Title of person signi	ins	