P17000012398

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COVER LETTER

TO: Amendment Section

Division of Corp	orations . 🕳		•	
NAME OF CORPO	RATION: Cassandra Macinto	sh Inc		
DOCUMENT NUM				
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Robert R Bryant			
		Name of Contact Persor		
	Robert R Bryant, CPA PLLC			
		Firm/ Company		
	10941 SE US Hwy 441			
		Address		
	Belleview FL 34420			
		City/ State and Zip Code		
	Bob@BoatmanBryant.com			
	•	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Robert R Bryant, CPA	\	at () 347-4424 le & Daytime Telephone Number	
Name of Contact Person		Area Co	le & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Street Address 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 of

302/APR 29 50

Cassandra Macintosh Inc

(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
17000012398	5.40		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)		
A. If amending name, enter the new name of the corporation:			
Harley A Inc	The new		
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:	13875 Joinatt Loop		
(Principal office address MUST BE A STREET ADDRESS)	Winter Garden FL 34787		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13875 Jomatt Loop		
	Winter Garden FL 34787		
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address			
Name of New Registered Agent			
Hank typics negative ngtm			
(Florida s	treet address)		
New Registered Office Address:	, Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Ager	<u>11:</u>		
I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.		
Signature of Mour	Parietared Agant 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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			<u></u>

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	<u>j ucic</u> .		
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f an amendment provides for an exch	nange, reclassification	on, or cancellation	of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not conta	uned in the amend	ment itseii:	
			-	_
-				
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The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ 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 east for the amendment(s) was/were sufficient for approval
by
(voling group)
March 17, 2021 Dated
Signature ONCO
(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)
Cassandra MacIntosh
(Typed or printed name of person signing)
President

(Title of person signing)