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SECRETARY OF STATE

C. GOLDEN

JUN 1 3 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ration: <u>Tave</u>	THE INC		
DOCUMENT NUM	ber: <u>P170000</u>	3250 W	.	
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	ERIKA CO	intero		
	Et Finan	Name of Contact Perso	Cesuc	
	PO BOX	Firm/Company		
	Moodst	OCK, GA	30188	
	_ ,	City/ State and Zip Cod	de .	
	EAKA, C E-mail address: (to be u	sed for future annual report	nothication J. Mall. CON	
For further informatio	n concerning this matter, plea	se call:	,	
ERIKA	Canter) at (678	, 643-071	
	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check fe	or the following amount made	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street	Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FILED

Articles of Amendment to

2018 1114 : 10

	Articles of Incorporation of	ZUIO JUNII AMII: I
TAVE TILE (Name of Cor	poration as currently filed with the Florio	SECRETARY OF STATE
, , ,	Document Number of Corporation (if know)	n)
Pursuant to the provisions of section 607,1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corpora	ation adopts the following amendment(s) to
A. If amending name, enter the new name of	the corporation:	777
name must be distinguishable and co-tain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co". A professional	
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFIC</u>		
D. If amending the registered agent and/or r new registered agent and/or the new registered agent and/or the new registered Agent		the name of the
New Registered Office Address:	(Florida street address)	, Florida
inch is gistered vyja e radicess.	(Cit _i)	(Zip Code)
New Registered Agent's Signature, if changing the language of the Agent's Properties of the Registered at the Registered		igations of the position.
	Signature of New Registered Agent, if cha	nging

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	John Dog	
X Remove	Y	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One) 1) X Change Add	Title	Name Flavo terrara Da Silva	Address 8191 TRAFAIOGR SG Jackson Ville FL 3221
Remove 2) Change Add Remove 3) Change Add			
Remove Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

	ing additional Articles, of eets, if necessary). (Be	specific)	-		
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	ovides for an exchange,	, reclassification, or	cancellation of issu	ed shares,	
f an amendment pr	ementing the amendme	nt if not contained i	n the amendment it	self:	
provisions for imp					
f an amendment provisions for imp (if not applicab	le, indicate N/A)				
provisions for imp	le, indicate N/A)				
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The date of each amendment(s) adoption:	, if other than the
date this document was signed. Effective date if applicable: JUNE 4, 2018	
(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 wildocument's effective date on the Department of State's records.	II not 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	
(voting group)	
☐ 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 (10-04-20) 8	
Signature Signature	
(B) a director, president or other officer – It 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)	
Diamor Correct	
<u> </u>	
(Typed or printed name of person signing)	
President.	
(Title of person signing)	,