P17000042472

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
\$67 \ CT;				





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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPOR	RATION: POZEK SALES A	AND ACQUISTIONS, INC			
	BER:				
The enclosed Articles	of Amendment and fee are sul	omitted for filing.			
Please return all corre	spondence concerning this mat	ter to the following:			
	KENNETH POZEK				
		Name of Contact Person			
	POZEK SALES AND ACQUISTIONS, INC				
	270 W. Plant Street, Suite 230	Firm/ Company O SUITE			
	Address				
	WINTER GARDEN, FL 34787				
		City/ State and Zip Code	:		
	KEN@POZEKGROUP.COM	I			
	E-mail address: (to be us	ed for future annual report	notification)		
	n concerning this matter, pleas		770 2025		
YASMIN GIBBS		at (
Name o	of Contact Person	Area Coo	le & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 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 Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

to

POZEK SALES AND ACQUISTIONS, INC.

(Name of Corporation as curren	atly filed with the Florida Dept.	of State)
P17000042472		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation add	opts the following amendment(s
A. If amending name, enter the new name of the corporation:		
POZEK SALES AND ACQUISITIONS, 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 professional corporation na	r the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		. ,
		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		: c [:]
·		. Wi
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office address Name of New Registered Agent		e of the
 .		
(Florida	street address)	
New Registered Office Address:		Florida
	(City)	(Lip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		of the position.
Signature of New	Registered Agent, if changing	
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (F)		

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)

Example:

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			
Remove			·-
6)Change			
Add			
Remove			

L. <u>II amending o</u>	or adding additional Articles, enter change(s) here:	
(Attach additio	onal sheets, if necessary). (Be specific)	
		
<u></u>		
. If an amendm	nent provides for an exchange, reclassification, or cancellation of issued sharor implementing the amendment if not contained in the amendment itself:	res,
provisions fo	or implementing the amendment if not contained in the amendment itself: oplicable, indicate N/A)	
(y nor up)	pricane, materic way	
,		
· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) ado date this document was signed.	otion: DS/d	9/4024	, if other than the
Effective date if applicable:			
	(no more than 90 day	vs after amendment file date)	
Note: If the date inserted in this bloodocument's effective date on the Department.		statutory filing requirements, this date	will not be listed as the
-Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board	d of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi		mber of votes east for the amendment(s)	
☐ The amendment(s) was/were appromust be separately provided for ea		voting groups. The following statemen separately on the amendment(s):	t
"The number of votes cast to	the amendment(s) was/were su	fficient for approval	
by			
	(voting group)		
08/29/2024 Dated	4_,	_	
Signature	fin Sand		
(By a dire selected, l		if directors or officers have not been ands of a receiver, trustee, or other court	
К	nneth Pozek		
	(Typed or printed name	of person signing)	
D	rector		
	(Title of person signing		