P17000042658

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COVER LETTER

NAME OF CORPORATION: NO Streaks or Smudges Inc. DOCUMENT NUMBER: P170000 42658	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jashua G. Williams Name of Contact Person No Streats of Smudges Inc. Firm/Company	
121 Kenwood Lve.	
Clear Water FL 33755 City/ State and Zip Code	
Dostreats or smudges inc Gyakoo, Com E-mail address: (to be used for future annual eport notification)	<u>}</u>
For further information concerning this matter, please call:	ETARY TARY
Toshua 6. Williams at 727 218-7865 Name of Contact Person Area Code & Daytime Telephone Number	of STA
Enclosed is a check for the following amount made payable to the Florida Department of State:	75H
\$35 Filing Fee	

Mailing Address

TO: Amendment Section

Division of Corporations

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

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

Articles of Amendment

to
Articles of Incorporation

No streaks or	Shrudges	Inc
Name of Corporation as currently 1	filed with the Florids Dept. of State)	
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatis</i> its Articles of Incorporation:	orida Profit Corporation adopts the fol	llowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P	". A professional corporation name	the abbreviation must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	$\mathcal{N}^{\mathcal{A}}$	
C. Enter near mailing address if applicables		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		17 JE ON
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	TAR PAR PAR
Name of New Registered Agent	UA	LEO Y OF ST CORPOR 2 PK 12
(Florida street	address)	— 30.5. O.S. VALIOHS
New Registered Office Address: (C	ity) / Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the post	ition.
Signature of New Reg	istered Agent, if changing	

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 D	<u>oc</u>	
X Remove	V Mike J	ones	
_X Add	SV Sally S	mith	
Type of Action (Check One)	<u>Title</u> ·	Name	Address
1) Change	0	Jashua & Williams	121 Kenwood
Add Remove			Ave. Clearwater FL 33755
2) Change	. NA	WA-	
Add		,	
Remove 3) Change Add	4/4	-NA	
Remove			
4) Change Add	4/1		WA
Remove			
5) Change Add	4/1	-NA	
Remove	, ,		10 / 0
6) Change	4/4	W/A	
Add			NA

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
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·	
. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
1// 4	

The date of each amendment(s) adoption: 6/6/2017, if other than the date this document was signed.
Effective date if applicable:
(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 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_6/6/17
Signature Jahua & Glilleams
(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)
appointed ridderally by that indicially)
Joshua G. Williams (Typed or printed name of person signing)
(Typed or printed name of person signing)
Director
(Title of person signing)