

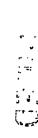
(Requestor's Name)	
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(Business Entity Name)	11/01/1901018-
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COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: YOTHERY AS Art 2, INC. P17000054797 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: April Heyes

Name of Contact Person Pottery As Art 2, INC
Firm/ Company 622 Cattlemen Road
Address Sarasota, FL 34232 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: April Heyes at (941), 735-2305

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: **№**\$52.50 Filing Fee □\$43.75 Filing Fee & □S43.75 Filing Fee & ☐ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

to

Articles of Incorporation

of

Potteru As Art 2. Inc.			
Name of Corporation as currently	filed with the Florida Dept. of State)	
P17000054797			
(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fi</i> its Articles of Incorporation:	forida Profit Corporation adopts the fo	ollowing amend	dment(s) to
A. If amending name, enter the new name of the corporation:			
			пен'
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.	o". A professional corporation name		
• •	Λ//Δ	" " "	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
		PH	i_i
			_ (")
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> N</u> A	- F	_
D. If amending the registered agent and/or registered office address	ss in Florida, enter the name of the		-
new registered agent and/or the new registered office address:			
Name of New Registered Agent //	A		
,			
(Florida stree	t address)		
New Registered Office Address:	, Florida		_
	City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the po	osition.	
Signature of New Reg	gistered 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:

? = 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 wild. 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: XChange	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te 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	VP	Joanna Palmer	360 W. Mckenzie St
Add			Punta Gorda, FL 3395
✓ Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

Attach ad	ing or adding addition Iditional sheets, if neces	sary). (Be specif	lic)			
_	/	V <i>jA</i>				
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				<u>-</u>	•	
						
	A71-					<u>-</u>
						
	•			·		
						
f an ame	ndment provides for a	ın exchange, recla	ssification, or ca	ncellation of issu	ied shares,	
provisio	ns for implementing to ot applicable, indicate	he amendment i <u>f n</u>	ot contained in t	the amendment i	tself:	
(9	ΛΙΙΑ	,				
	/ / / /					
						
	• • •					

	9104	119	, if other than the
The date of each amendment(s) adoption: date this document was signed.	1/4/		, if other than the
Effective date <u>if applicable</u> :			
	(no more than 90 days	after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of S		tatutory filing requirements,	this date will not be listed as the
Adoption of Amendment(s) (CH)	ECK ONE)		
The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a	hareholders. The numb pproval.	er of votes east for the amend	iment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting			
"The number of votes east for the amend	lment(s) was/were suffi-	cient for approval	
by(voti		····	
(voti	ng group)		
☐ The amendment(s) was/were adopted by the baction was not required.	oard of directors withou	it shareholder action and sha	reholder
☐ The amendment(s) was/were adopted by the i action was not required.	ncorporators without sha	areholder action and sharehol	lder
Dated10 21 1			
Signature	april Heye	D	
(By a director, president)	lent or other officer -Off	directors or officers have no	
selected, by an inco- appointed fiduciary	-	s of a receiver, trustee, or oth	er court
Ąį	ril Heyes	of person signing)	
	Typed or printed name of	of person signing)	
	President		<u> </u>
	(Title of pers		