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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

,JOOL,, Inc NAME OF CORPORATION:			
P17000055265 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are si			
•	_		
Please return all correspondence concerning this ma	atter to the following:		
Jacob Kauffman			
	(Name of Contact Pe	erson)	
JOOL, Inc			
	(Firm/ Company	·)	,
511 SE 5th Ave			
	(Address)		
Pt. Lauderdale FL 33301	(,		
· · · · · · · · · · · · · · · · · · ·	(City/ State and Zip	Code)	
JAKE@JOOLCORP.COM			
E-mail address: (to be us	sed for future annual rep	port notification	)
For further information concerning this matter, plea	ise call:		
Jacob Kauffman	31	954	
(Name of Contact Pers	son)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida I	Department of S	State:
■ \$35 Filing Fee		Certif s Certif	icate of Status ied Copy tional Copy is
Mailing Address		reet Address	
Amendment Section Division of Corporations		nendment Secti vision of Corpe	
Division of Corporations	וכו	уваон от согрс	71 acres 13

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

## Articles of Amendment to Articles of Incorporation of

FILED

18 JUL 30 AH 9: LI JOOL, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P17000055265 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 511 SE 5th Ave. #2104 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) Ft. Lauderdale FL 33301 C. Enter new mailing address, if applicable: 511 SE 5th Ave #2104 (Mailing address MAY BE A POST OFFICE BOX) Ft. Lauderdale FL 33301 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Jacob Kauffman Name of New Registered Agent: 511 SE 5th Ave. #2104 Ft. Lauderdale FL 33301 (Florida street address) New Registered Office Address: Ft. Lauderdale , Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent:

unite 1

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 X Remove X Add	PT         John I           V         Mike           SV         Sally 3	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I)Change	VP	Robert Kauffman	5757 SW 89th Laine
Add			Cooper City FL 33328
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:				
(attach additional sheets, if necessary).	(Be specific)			
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	June 1st, 2018	
	late of each amendment(s) adoption:	_, if other than the
date	his document was signed.  June 1st, 2018	
*		
LIII	tive date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.	oe listed as the
Ado	tion of Amendment(s) ( <u>CHECK ONE</u> )	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated	
	Signature //w//	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)  Jacob Kauffman	_
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	