P17000070928

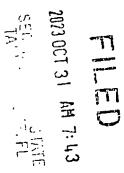
	(Requestor's Name)	<u>-</u>
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A. BUTLER NOV - 2 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: JAMS BY JILLIA	AN CORP	
DOCUMENT NU	P17000070928		
The enclosed Artic	cles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	Jillian M. Mangi		
		Name of Contact Person	1
		Firm/ Company	
	133 NE 2nd Avenue, Apt 15	17	
		Address	
	Miami, Florida 33132		
		City/ State and Zip Code	2
	gigimc24@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	ation concerning this matter, plea	se call:	
Jillian M. Mangi		914 at (772-8286
Nai	me of Contact Person		de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	e □\$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)
- / 1	Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

(Name of Corporation as currently filed wi		
	th the Florida Dept. of State	31 AM 7: 43
P17000070928	SEI	. 07175
(Document Number of Corpora	tion (if known) IALL	DES. FL
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida P</i> its Articles of Incorporation:	Profit Corporation adopts the	following amendment(s)
. If amending name, enter the new name of the corporation:		
filty Co.		The new
name must be distinguishable and contain the word "corporation." "company, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professi "chartered." "professional association," or the abbreviation "P.A."	" or "incorporated" or the ab ional corporation name mus	breviation "Corp.," t contain the word
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
). If amending the registered agent and/or registered office address in Flonew registered agent and/or the new registered office address:	orida, enter the name of the	
Name of New Registered Agent		
	<i>x)</i>	<u></u>
(Florida street addres.		
(Florida street address) New Registered Office Address:	. Florida	

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: XChange	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X_ Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<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				
δ) Change			 	
Add				
Pamaya				

E. <u>If amendi</u>	ng or adding additional .	Articles, enter char	nge(s) here:		
(Attach add	ditional sheets, if necessar	ry). (Be specific)			
<u></u>					
	- ·				
<u> </u>					
		·=·-			
: If an ame	ndment provides for an e	evchange reclassifi	cation or cancellat	ion of issued chares	
provision	is for implementing the a	amendment if not c	ontained in the am	endment itself:	<u>.</u>
(if no	t applicable, indicate N/A)			
		·			

	•		
			£
The date of each a date this document		loption:, ii	t other tr
Effective date if a	pplicable:		
		(no more than 90 days after amendment file date)	
		lock does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed
Adoption of Amer	ndment(s)	(<u>CHECK ONE</u>)	
The amendment action was not r	` '	pted by the incorporators, or board of directors without shareholder action and share	eholder
		pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.	
by the sharehol The amendment must be separa "The num	ders was/were sub t(s) was/were approached for each of votes cast f	fficient for approval. roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval	
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by the sharehol The amendment must be separa "The num by	og/14/2023 Dated Signature (By a disselected appointed)	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval (voting group) (voting group) rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	



October 11, 2023

JILLIAN M. MANGI 133 NE 2ND AVENUE APT 1517 MIAMI, FL 33132

SUBJECT: JAMS BY JILLIAN CORP

Ref. Number: P17000070928

We have received your document for JAMS BY JILLIAN CORP, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

51 31 276)

Letter Number: 623A00023531