## P17000082318

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2027 JUN -J AMII: 59
SECRETARY OF STATE

JUL 0 7 2021 A RAMSEY

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: ICE ADDICTION INC. DOCUMENT NUMBER: \_\_\_\_\_\_ P 17 0000 823 [8 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CLEVELAND LERCY LUSHINGTON
Name of Contact Person ICE Addiction Inc 1166 STATE STREET WOS.
Address THE K SUNVITE FL 32264.

City/ State and Zip Code rceaddiction 2018 @ grac. 1. Com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ( /eNELAND Lengy Lushing TON at ( 904 ) 803-3973.

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: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

ICE Addiction INC.	2027 JUN - 1 AM
	rrently filed with the Florida Dept. of State
P 170000 82318	TATE THANKS OF STATE
	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:
	The new
	on," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
$(Principal\ office\ address\ \underline{MUST\ BE\ A\ STREET\ ADDRESS}\ )$	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent	
(Flor	rida street address)
New Registered Office Address:	, Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	
Signature of N	New Registered Agent, if changing

Check if applicable

<sup>☐</sup> 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.

X Change	PT	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>	Address
1) Change	VP.	CORTNEY TAYLOR	221 DEERFIEL C'RCE Kinssland GA.
Add			
<u>'X</u> Remove			3,548.
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if nece	n <mark>al Articles, enter c</mark> l ssary). (Be specific	c)		
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in amendment provides for				
ovisions for implementing to (if not applicable, indicate	he amendment if no N/A)	it contained in the amend	<u>Iment itself:</u>	
	•			
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		<del>- N/N</del>		
		<del></del>		
				· <u> </u>

The date of eacl	n amendment(s) adoption: 05/18/2021	, if other than the
late this docume Effective date <u>if</u>	applicable: 05/18/202/  (no more than 90 days after amendment file date)	
Note: If the dat	e inserted in this block does not meet the applicable statutory filing requirements, this date vertice date on the Department of State's records.	
Adoption of Am	nendment(s) ( <u>CHECK ONE</u> )	
☐ The amendme action was no	ent(s) was/were adopted by the incorporators, or board of directors without shareholder action as trequired.	ınd shareholder
	ent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) nolders was/were sufficient for approval.	
	ent(s) was/were approved by the shareholders through voting groups. The following statement rately provided for each voting group entitled to vote separately on the amendment(s):	
"The nu	amber of votes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	Signature  (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)	
	(Typed or printed name of person signing)  (Title of person signing)	