P18000000179

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MOCHI 3D PRINT	`S, INC 	
DOCUMENT NUM	BER:		
	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	SEAN KOWLESSAR		
		Name of Contact Person	1
	NEPTUNE'S DOG TRAINI	NG AND OBEDIENCE . I	NC
		Firm/ Company	
	842 ROYAL PALM BEACH	BLVD	
		Address	-
	ROYAL PALM BEACH, FL	.33411	
		City/ State and Zip Cod	e
	mtjs1960@hotmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
SEAN KOWLESSA	R	at (662-5307
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐S43,75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	illing Address pendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amen Divisio The C 2415	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 assee FL 32303

Articles of Amendment to Articles of Incorporation of

MOCHI 3D PRINTS, INC	
(Name of Corporation as c	currently filed with the Florida Dept. of State)
P18000000179	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion:
NEPTUNE'S DOG TRAINING AND OBEDIENCE, INC	The new
name must be distinguishable and contain the word "corporat "Inc.," or Co.," or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office:	
Name of New Registered Agent	
	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	d Agent: amiliar with and accept the obligations of the position.
	·
Signature o	f New Registered Agent, if changing

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 Do., PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

r.xampie: - <u>X</u> .Change	<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	Name	Address
l) Change			
Add			
Remove			
2) Change		_	
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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'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/4)	maen <i>aaantonal si</i>	ling additional Arti leets, if necessary).	(Be specific)				
provisions for implementing the amendment if not contained in the amendment itself:							
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provisions for implementing the amendment if not contained in the amendment itself:							
(if not applicable, indicate N/A)	an amendment p	rovides for an exch	iange, reclassifi	cation, or can	<u>cellation of iss</u>	ued shares,	
	<u>irovisions for imp</u> <i>Cit not applica</i>	dementing the ame	ndment if not e	ontained in th	<u>e amendment</u>	itself:	
	(1) 11.11 (1) 11.11.11	The state of the s					
							
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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	5/2024	
Effective date it applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	clock does not meet the applicable statutory filing requirements, this department of State's records.	late will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder act	ion and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment officient for approval.	ı(s)
	proved by the shareholders through voting groups. The following statent each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	9/11/24	
Signature 8	m Kowlessan	
(By a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other couted fiduciary by that tiduciary)	
	SEAN KOWLESSAR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	. <u></u>