11/8/23, 3:32 PM



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : TAX S PRO CORP

Account Number : I20200000147 Phone : (786)307-2733

Fax Number : (954)420-7118

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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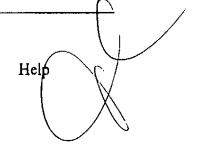
E :6 HV 8- AON E

COR AMND/RESTATE/CORRECT OR O/D RESIGN ECLIPSE ENTERPRISE INC.

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Certificate of Status	0
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E07-8 PM 3:

COVER LETTER

TO: Amendment Sec Division of Con				
NAME OF CODEO	RATION: ECLIPSE ENTER	PRISE INC		
DOCUMENT NUM	BER: P18000019853			
	s of Amendment and fee are su	haired for files		
		•		
riesse return all com	espondence concerning this ma	iter to the following:		
	ANWAR I PUELLO			
		Name of Contact Person	1	
	TAXS PRO CORP			
		Firm/ Company	<u> </u>	20
	8030 PINES BLVD			73 Z
Address				1 2 2
	PEMBROKE PINES, FL 33	024		-8
		City/ State and Zip Code	e	23 NOV -8 AM
	INFO@laxspro.com			
	E-mail address: (to be us	sed for future annual report	notification)	2023 NOV -8 AN 5:3
For further information	on concerning this matter, pleas	se call:		; Ti
anwar i puello		786 at (307-2733	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State;	
■ \$35 Filling Fee	Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street Address		
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Φ

Articles of Amendment to Articles of Incorporation

eclipse enterprise inc					
(Name o	f Corporation as curren	tly filed with the Florida Dep	t. of State)		—
p18000019853					
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation &	dopts the following ame	ndment(s) to
A. If amending name, enter the new na	ime of the corporation:				
	_		The	new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co".	A professional corporation n	or the abbreviation "Co ame must contain the	orp.," word	
. •		2703 IMPALA LANE			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		KISSIMMEE, FL 34746	,	_	
				123 K	***
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2703 IMPPALA LANE	LANA	18- Ad	
		KISSIMMEE, FL 34746	388		
			1.00 H.C	بغ	
D. If amending the registered agent an new registered agent and/or the new			me of the	<u> </u>	
Name of New Registered Agent	MEZA KEVIN D				
	2703 IMPALA LANE		· ·		
	(Florida s	reet address)			
New Registered Office Address:	KISSIMMEE,		, Florida		
		(City)	(Zip Code)		
New Registered Agent's Signature, if cl I hereby accept the appointment as regist			is of the position.		
	Leur V	MIZ D 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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>-</u> <u>şv</u>	Sally Smith	
Type of Action	Title	Name	<u>Addres</u> s
(Check One)	Р	MEZA, KEVIN D	1865 NW 16 ST #3
1) Change Add		_	1865 NW 16 ST #3 25 23 NO NIAMI, FL 33125 1 1 1
X Remove			HAN - 8
2) Change	P	MEZA, KEVIN D	2703 IMPALA LANE
X Add			KISSIMMEE, FL 34746
Remove 3) Change	VP	MEZA, MICHAEL A	1865 NW 16 ST #3
Add			Mining, to 35 kg
X Remove			
4) Change	VP	MEZA, MICHAEL A	2703 IMPALA LANE
X Add			KISSIMMEE, FL 34746
Remove			
5) Change	T	MEZA, MIGUEL A	1865 NW 16 ST #3
Add			MIAMI, FL 33125
X Remove			
6) Change	<u>T</u>	MEZA, MIGUEL A	2703 IMPALA LANE
X Add			KISSIMMEE, FL 34746
Remove			

E. If amending or adding additional Articles, enter change(s) here:

	11/08/2023	
The date of each amendme date this document was sign		, if other than the
Effective date if applicable	:	
	(no more than 90 days after amendment file date)	· ·
	n this block does not meet the applicable statutory filing requirements, thin the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s	(CHECK ONE)	
The amendment(s) was/w action was not required.	vere adopted by the incorporators, or board of directors without shareholder	action and shareholder
	vere adopted by the shareholders. The number of votes cast for the amendm (were sufficient for approval.	ent(s)
	were approved by the shareholders through voting groups. The following staided for each voting group entitled to vote separately on the amendment(s):	tement
"The number of vot	tes cast for the amendment(s) was/were sufficient for approval	
by		
	(voling group)	
11/0 Dated	08/2023	
Signature		
	(By a director, president or other officer. If directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
	KEVIN D MEZA	AH
	(Typed or printed name of person signing)	SS
	PRESIDENT	SEE.
	(Title of person signing)	FAIR 3