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

TO: Amendment Section

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Monet Inc  DOCUMENT NUMBER: P18000031465
DOCUMENT NUMBER: P 18 0000 314 65
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Laurence Monette  Name of Contact Person  Monet Inc
Mone T Firm/Company
1990 Oak Pr  Address  Alva Fl. 33920  City/ State and Zip Code
Address
Alva Fl. 33920
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Laurence Monette at (239) 478 - 4903  Name of Contact Person Area Code & Daytime Telephone Number
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  Certificate of Status  Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)  S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)

Street Address

Clifton Building

Amendment Section
Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301 18 MAY 29 AH IU: 42 SECRETARY OF STATE



June 7, 2018

LAURENCE MONETTE 1990 OAK DRIVE ALVA, FL 33920

SUBJECT: MONET, INC. Ref. Number: P18000031465

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

You can check only one (1) box regarding the adoption of amendment.

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.

Letter Number: 618A00011929

Claretha Golden Regulatory Specialist II

www.sunbiz.org

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May 29, 2018

LAURENCE MONETTE 1990 OAK DRIVE ALVA, FL 33920

SUBJECT: MONET, INC. Ref. Number: P18000031465

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You can check only one (1) box regarding the adoption of amendment.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 318A00011125

RECLINED

18 JUN - 7 PM 2: 03

SECRETARY : F STATE
ALLAHASSI : FLORIDA



May 22, 2018

LAURENCE MONETTE 1990 OAK DRIVE ALVA, FL 33920

SUBJECT: MONET, INC. Ref. Number: P18000031465

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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.

Letter Number: 318A00010686

Claretha Golden Regulatory Specialist II

www.sunbiz.org

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## Articles of Amendment

FILED

At	of	
Monet		2018 JUN 11 PM 4:57
(Name of Corporation	as currently filed with the F	lorida Dept. of SLAECRETARY OF STATE
P 180000	21415	TATLAHASSEE, FLORID
(Docume)	3 14 6 5 nt Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Con	rporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	poration:	
		$Th_{\mathcal{C}} = now$
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the al	"Inc," or "Co". A professio	or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDR</u>	RESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
·		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		iter the name of the
	The transfer of the transfer o	
Name of New Registered Agent		··········
<del></del>	(Florida street address)	
	(Fibrial sirver dadress)	
New Registered Office Address:	(City)	, Florida (Zip Code)
	(Chy)	(2g) Cont
New Registered Agent's Signature, if changing Regis		
I hereby accept the appointment as registered agent. I t	am familiar with and accept th	c obligations of the position.

Signature of New Registered Agent, if changing

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	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u></u>	Laurence Monotte	1990 Oak Prive
<u></u> ≻ ∧dd			Alva Fl
Remove			33920
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)  If 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/A)	•	(Be specific)
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The date of each amendment(s) adoption: 5 - 25 - 2018 . if other than the
date this document was signed.
Effective date <u>if applicable</u> : 6 - 1 - 2018  (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"  (voting group)
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
5-25-2018
Signature  (By a director, president or other officer – if directors or officers have not been
Signature Cothe Www.
(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)
16 100
(Typed or printed name of person signing)
(Typed or printed name of person signing)
(Title of person signing)
(Title of person signing)