## P18 0000 50983

| (Requestor's Name)                      |  |  |
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| (Address)                               |  |  |
| (Address)                               |  |  |
| (City/State/Zip/Phone #)                |  |  |
| PICK-UP WAIT MAIL                       |  |  |
| (Business Entity Name)                  |  |  |
|   |  |  |
| (Document Number)                       |  |  |
| Certified Copies Certificates of Status |  |  |
| Special Instructions to Filing Officer: |  |  |
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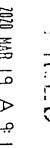
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: ASH 2   | UE SQUAD, INC   |
|--|---|
| DOCUMENT NUMBER: P18000050   | 983   |
| The enclosed Articles of Amendment and fee are submi   | tted for filing.  |
| Please return all correspondence concerning this matter  | to the following:   |
| - Anthony R  | Name of Contact Person  |
| <u>A&amp;4</u> 30  | DG SQUAD DDC<br>Firm/ Company   |
|  | Address Address   |
| CLern  | City/ State and Zip Code  |
|  | Dancil. Con<br>fortulture annual report notification)   |
| For further information concerning this matter, please c                                       | all:  |
| Anthony R. Cherchini<br>Name of Contact Person   | at (467) 725-1553  Area Code & Daytime Telephone Number   |
| Enclosed is a check for the following amount made pay  | able to the Florida Department of State:  |
| Certificate of Status  | □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303              |

## Articles of Amendment

to Articles of Incorporation

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|---|---|---|---|----|-----|
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| - HEH Bug Sayad I  | NC, 2020 MAR 19  |
| (Name of Corporation as currently  | filed with the Florida Dept. of State) A 9: 14                 |
| <u> </u>   | 183  |
| (Document Number of  | Corporation (if known)   |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:  | Torida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation:  |  |
| MA   | The new  |
| name must be distinguishable and contain the word "corporation," "co<br>"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A<br>"chartered," "professional association," or the abbreviation "P.A." | ompany," or "incorporated" or the abbreviation "Corp"          |
| B. Enter new principal office address, if applicable:  | 9226 Ivywood St.   |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | Clernant, FC 34711   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | 9226 Ivg. 200 St.<br>Clermont, FL 34711                        |
| D. If amending the registered agent and/or registered office addre   | ess in Florida, enter the name of the                          |
| new registered agent and/or the new registered office address:   |  |
| Name of New Registered AgentAnthony R.   | Cherisiai  |
| Name of New Registered Agent Anthony R.  9226 Ivg.  (Florida Agent)  | wood St.   |
| (Florida Auke  | et address)  |
| New Registered Office Address: Clery ont   | Florida34711   |
| 10   | City) (Zip Code)   |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi  | ith and accept the obligations of the position.                |
|  |  |
| Signature of New Reg   | gistered 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:<br>X Change       | <u>PT</u>    | John Doc             |                      |
|----------------------------|--------------|----------------------|----------------------|
| X Remove                   | <u>v</u>     | Mike Jones           |                      |
| <u>X</u> Add               | <u>sv</u>    | Sally Smith          |                      |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u>          | <u>Addres</u> s      |
| 1) Change                  | P            | Haris Dzin           | 102 N. Pressulen Ave |
| Add<br>X Remove            |              |                      | Longwood, FL 32750   |
| 2) Change                  | <u> P</u>    | Anthony R. Cherubini | 9226 Trywood St      |
| Add Remove Change          |              |                      | <u> </u>             |
| Add<br>Remove              |              |                      |                      |
| 4) Change                  |              | _                    |                      |
| Add<br>Remove              |              |                      |                      |
| 5) Change                  | _            |                      |                      |
| Add<br>Remove              |              |                      |                      |
| 6) Change                  |              |                      |                      |
| Add Remove                 |              |                      |                      |

| Attach addition | al sheets, if necessary). (Be specific)  |
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| f an amendme    | nt provides for an exchange, reclassification, or cancellation of issued shares, |
| provisions for  | implementing the amendment if not contained in the amendment itself:             |
| (if not app     | icable, indicate N/A)  |
|                 | NIA  |
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| The date of each amendment(s) a late this document was signed.           | doption:   | if other than  |
|--|--|--|
| Effective date <u>if applicable</u> :                                    | P(A<br>(no more than 90  | days after amendment file date)  |
| Note: If the date inserted in this be document's effective date on the D | block does not meet the applicate cpartment of State's records.          | able statutory filing requirements, this date will not be listed as                      |
| Adoption of Amendment(s)   | (CHECK ONE)  |  |
| The amendment(s) was/were adaction was not required.                     | opted by the incorporators, or b   | oard of directors without shareholder action and shareholder                             |
| The amendment(s) was/were adby the shareholders was/were si              |  | number of votes cast for the amendment(s)  |
|  |  | ugh voting groups. The following statement ote separately on the amendment(s):           |
| "The number of votes cast  | for the amendment(s) was/were  | e sufficient for approval  |
| by   | (voting group)   |  |
| selecto  | of by an incomporator – if in the ted fiduciary by that fiduciary)  Hack | er – if directors or officers have not been hands of a receiver, trustee, or other court |
|  | President (Title of person sign  | ·in  |
|  | ( i the of person sign   | ung <i>t</i>   |