P18 0000 53697

Office Use Only



500338937725

01/13/20--01082--008 **35.00

R. WHITE

FEB 0 7 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Carol Sells Tampa	Bay Inc.	
DOCUMENT NUI			
The enclosed Articl	es of Amendment and fee are su	ıbmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	Carol Cain Pooley		
		Name of Contact Person	n
	Carol SellsTampa Bay Inc.		
		Firm/ Company	
	5700 Mariner Street, Apt 201	• •	
		Address	
	Tampa FL 33609		
		City/ State and Zip Code	e
For further informat	E-mail address: (to be us	·	notification)
Carol Pooley		at (⁸¹³	992-7724
Name	e of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.0	ailing Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

2020 20113 21111:01

Carol Sells Tampa Bay Inc.	
(Name of Corporation as current)	v filed with the Florida Dept. of State)
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
Carol Cain Pooley Inc	The new
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office address: Name of New Registered Agent Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agent:	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	(City) (Zip Code) with and accept the obligations of the position. Transfer engineering (Zip Code)

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	<u>PT</u>	John Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	ones		
X Add	<u>sv</u>	Sally St	<u>mith</u>	N/A	
Type of Action (Check One)	Title		<u>Name</u>	. , .	<u>Addres</u> s
1) Change					
Add					
Remove					
2) Change		_			
Add					
Remove 3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		-			
Add					
Remove					
5) Change		_			
Add				<u>-</u> -	
Remove					

Attach additional sheets, if necessary).	(Be specific)	NA		
	· · · · · · · · · · · · · · · · · · ·			
				
				 .
		<u> </u>		
		· · · · · ·		
		- 		
				
f an amendment provides for an exch provisions for implementing the ame	ange, reclassificatind ment if not cont	on, or cancellation of is ained in the amendmen	sued shares, t itself:	
(if not applicable, indicate N/A)			11a	
			NIK	
		-		-
	<u> </u>			
				

r e

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareho action was not required.	der action and shareholder
Dated	
Signature Call Call toles	
(By a director, president or other officer - if directors or officers have no	
selected, by an incorporator – if in the hands of a receiver, trustee, or ot appointed fiduciary by that fiduciary)	her court
Carol Cain Pooley	
(Typed or printed name of person signing)	
<u> JWYW)</u>	
(Title of person signing)	