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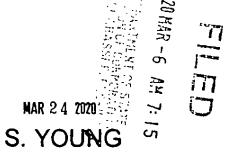
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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Elite Pawn TNC.
DOCUMENT NUMBER: <u>P/8 0000 6/2 98</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christopher Theodore Name of Contact Person Flike Paris The
Elite Pawn Inc Firm/Company
12378 US-19 Address
Hudson, FL 34667 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christopher Theodore at (508) 287-8282 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 Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) S43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amandment Series Amandment Series
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Elite Pawn Inc	
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incarporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) New Registered Agent and/or the new registered office address: New Registered Agent Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	(Name of Corporation as currently	filed with the Florida Dept. of State)
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Agent Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	P18000061298	
A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation." "company," or "incurporated" or the abbreviation "Corp." "Inc." or "Co." a professional corporation name must contain the word "chartered." "professional association." or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: The reby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	(Document Number of C	Corporation (if known)
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Name of New Registered Agent New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1 A 1800 7 T
New Registered Office Address: (City) Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
New Registered Office Address: (City) Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	\mathcal{N}	A
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	(Florida stree	u address)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Office Address:	A
Signature of New Registerea Agent, if Changing	New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with the second s	th and accept the obligations of the position.
	Signature of New Reg	gisterea Agent, ij 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> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	V Roy T Holmes	7741 Talisman Dr PORT Richey F1 34668
Add		PORT Richey F1 34668
Remove		
2) Change		
Add		
Remove 3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	1		
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f an amendment provides for an exc	hange, reclassificati	on, or cancellation o	f issued shares,	
provisions for implementing the amo (if not applicable, indicate N/A)	endment if not conta	ined in the amendn	nent itself:	
N	\mathcal{A}			
	<u> </u>			
	·			

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, this date will not be 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 incorporators, or board of directors without shareholder action and shareh action was not required. 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	_		20/2020	if other than t
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be 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 incorporators, or board of directors without shareholder action and shareh action was not required. 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		0/9	1 /2020	
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 □ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder was not required. □ 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 				this date will not be listed as
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(voting group)	by		"	
		(voting group	יו	
Dated 2 /20 /2020				
	Dated	2/20/2020	ク	
(By a director, president or other officer – if directors or officers have not been	Dated	2/20/2020	<u></u>	
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	DatedSignature		ther officer – if directors or officers have no	ot been
appointed fiduciary by that fiduciary)	Dated Signature	(By a director, president or of selected, by an incorporator	- if in the hands of a receiver, trustee, or of	ot been her court
	Dated Signature	(By a director, president or of selected, by an incorporator	- if in the hands of a receiver, trustee, or of	ot been her court

From: Roy Holmes

Sent: Wednesday, February 19, 2020 3:52 PM

To: elite pawn

Subject: Bill of Sale for Elite Pawn inc.

BILL OF SALE DATE 02/19/2020

I ROY T. HOLMES OF 7741 TALISMAN DR PORT RICHEY FL 34668, SELL MY 50 PERCENT SHARE OF OWNERSHIP IN ELITE PAWN INC LOCATED AT 12378 US 19 HUDSON FLORIDA 34667, AND RESIGN MY POSITION AS VICE PRESIDENT ON THIS DAY 02/19/2020. I AM SELLING MY 50 PERCENT OWNERSHIP FOR THE SUM OF 17,000.00 TO CHRISTOPHER THEODORE OF 7306 CLEARWATER DR SPRING HILL FL 34606, AND HE WILL NOW BE THE SOLE OWNER OF ELITE PAWN INC AND RESPONSIBLE FOR CURRENT AND FUTURE OBLIGATIONS OF SAID BUSINESS.





Acknowledgment by Individual

State of Florida			
County of Pascs		·	
The foregoing instrument was acknowledged before r	ne this	201	_ day
of February, 20 20, by m	neans of physical presence by		
Christopher Medere In	ame of person acknowledging).		
Personally known to me Produced Identification Type of Identification Produced ☐ I = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	Davies Cicini		
Notary signature Canal			
Notary name (typed or printed) Rener Con-			
Title (e.g., Notary Public) Nothing Public			
Place Seal Here			
Renee Caropolo State of Florida My Commission Expires 04/28/2023 Commission No. GG 328401			
For Bank Purposes Only			
Description of Attached Document			
Type or Title of Document			
6.11 of care 3/19/2011.2			
Document Date	Number of Pages		
0/19/2000			
Signer(s) Other Than Named Above			
Ray Holmis			
•			



FO01-000DSG5350FL



Acknowledgment by Individual

State of Florida			
County of Par w			
	d before me this	2,7	_ day
of February , 202	arphi , by means of physical presence by		
Roy Holmot	(name of person acknowledging).		
Personally known to me Produced Identification			
Type of Identification Produced —			
Notary signature Kn. Co	Δ		
Notary name (typed or printed)	Cropilo		
Title (e.g., Notary Public)	Public		<u>_</u>
Place Seal Here			
Hence Caropolo State of Florida My Commission Expires 04/28/2023 Commission No. GG 328401			
For Bank Purposes Only	-		
Description of Attached Document			
Type or Title of Document			
B,11 of Sale 2/191	1000		
Document Date	Number of Pages		
06,6/2/6			
Signer(s) Other Than Named Above			
Christonew Treader	-e		



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