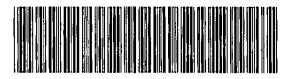
P18 0000 78480

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

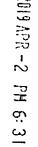
Office Use Only

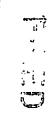


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04/02/19--01004--026 ++35.00

R. WHITE APR 10 2019





COVER LETTER

Division of Corporations ISLAND VIBES KAVA INC NAME OF CORPORATION: DOCUMENT NUMBER: 180000 78480 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HARRI TERVOLA

Name of Contact Person 2128 OKEECHOBEE BLVD PALM BEACH EL 33409
City/ State and Zip Code TERVOLA @ BELFIN.NET address: (to be used for future annual report notification) For further information concerning this matter, please call: TERVOLA at 561 906-7795

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$**43.75 Filing Fee & **□**\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

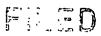
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee. FL 32301

Articles of Amendment

Articles of Incorporation of



to

ISLAND_	VIBES	KAVA	/	PH 6:31
(Name	of Corporation as cu	rrently filed with the	· Florida Dept. of State)	. 71-
6180000	78480		TAITA	
	(Document Nur	ber of Corporation (i	f known)	
Pursuant to the provisions of section 60 its Articles of Incorporation: A. If amending name, enter the new page 15.			Corporation adopts the follo	wing amendment(s)
				
name must be distinguishable and co "Corp.," "Inc.," or Co.," or the design word "chartered," "professional assoc B. Enter new principal office address	gnation "Corp," "Inc,' iation," or the abbrevia	or "Co". A profes		
(Principal office address MUST BE A				
C. Enter new mailing address, if app (Mailing address MAY BE A POS) D. If amending the registered agent a	r OFFICE BOX) and/or registered office		enter the name of the	
new registered agent and/or the n	ew registered office ac	<u>ldress:</u>		
Name of New Registered Agen	<u> </u>			
	(Flor	ida street address)	~	
New Registered Office Address	:		, Florida	
		(City)		Zip Code)
New Registered Agent's Signature, if I hereby accept the appointment as regi	changing Registered F istered agent. I am fan	Agent: niliar with and accept	the obligations of the position	on.
	Signature of	New Registered Agen	t, 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	<u>PT</u>	John Doe	2	
X Remove	<u>V</u>	Mike Jon	n <u>es</u>	
X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	P	_	DAVID A BRANDA	2128 OKEELHOBEE BLYD
Add P Remove				W.P.B. FL 33409
2) VP Change				2128 OKEE CHOSEE BLV. W.P.B. FL 33409
Add Cho	ingo '	to P		
3) Change				
Add				
4) Change		-		
Add				
5) Change		- -		
Add Remove				
6) Change		_		
Add Remove				

Attach <i>a</i>	dditional sheet	s, if necessa	ıry). (Be s	specific)						
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	not applicable.			1.60						_
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The date of <mark>each</mark> a late this document	wee claned	, if other than
E ffe ctive date <u>if a</u>	Gal 10th 2010	
Mective date it a	(no more than 90 days after amendment file date)	
	inserted in this block does not meet the applicable statutory filing requirements, this date we date on the Department of State's records.	ill not be listed as
Adoption of Amer	ndment(s) (CHECK ONE)	
	t(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ders was/were sufficient for approval.	
	t(s) was/were approved by the shareholders through voting groups. The following statement tely provided for each voting group entitled to vote separately on the amendment(s):	
"The num	ber of votes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not r		
[Dated	
S	Signature	
	(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)	
	HARRI TERVO LA (Typed or printed name of person signing)	
	(Title of person signing)	2-18-16
	Notary Public State of Florida Eudalis De Artime My Commission GG 175226 Facing 01/15/2022	