# P18000080737

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SECRETARY OF STATE

AUG 2 7 2018

# **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	DI DA	5 the Mar 20080727	1 (orp
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	la	Name of Contact Person	1
	· <del>-·-</del>	Firm/ Company	<del></del>
	1337	Desoto S	St.
		Address	
	Mello	urne, Fl. 3	2935
City/ State and Zip Code			
	E-mail address: (to be us	sed for future annual report	mail. COM notification)
For further information	concerning this matter, pleas	se call:	
Laure	en Curri	at (321	, 750-7014
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

## Street Address

Amendment Section Division of Corporations Clifton Building

# **Articles of Amendment**

to

	Articles of Incorporation
	and the second s
She's	the man corp FILED
(Name of Corporat	ion as currently filed with the Florida Dept. of State)
<u> </u>	000080727 201 MB 19 P 3 13
(Docu	ment Number of Corporation (if known) SEGRE TARY OF STATE
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	ment Number of Corporation (if known) SECRETARY OF STATE THE HASSEE FLORIDA la Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	gornoration:
	The new
	rd "corporation," "company," or "incorporated" or the abbreviation or, "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable	1222 Dorato St
(Principal office address MUST BE A STREET AD	
	<u> </u>
C. Enter new mailing address, if applicable:	1200 0
(Mailing address MAY BE A POST OFFICE BE	1532 Desoto St.
	Melbourne, F132935
	<del></del>
	ered office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	<u> auren Curri</u>
į (	332 Desoto St.
	(Florida street address)
New Registered Office Address:	nelbourne Florida 32935
	(City) (Zip Code)
New Designation of America Comments of the Com	-tan-
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Agent:  I am familiar with and accept the obligations of the position.
	nature of New Registered Agent. if changing
Sign	nature 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	<u>PT</u> John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	michaela Curri	675 Pine RiverPlace
Add			Oviedo, Fl. Apt 313
X Remove			35.765
2) Change	<u>P</u>	Lauren Curri	1332 Desoto St. Melbourne, F1.32135
Remove 3) Change  Add	<u></u>	Collay Farrand	1332 Pesoto St. Melbourne, Fl. 32935
Remove			——————————————————————————————————————
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

	ding or adding add additional sheets, if		enter change(s) hero specific)	<u>e</u> :		
	Change	Classi	Fication	from	retail	to
		EIVICE.			<del></del>	
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provisi	nendment provides ions for implementi not applicable, indi	ing the amendmer	reclassification, or nt if not contained i	cancellation of issuin the amendment i	<u>ied shares,</u> tself:	
	··-					
		· <u> </u>				

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 8/15/19	
(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 document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
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)	
☐ 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.	
Dated	
(By 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)	<del></del>
Lauren Curri	
(Typed or printed name of person signing)	
President	
(Title of person signing)	