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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: JO'FINNE ENTERPRISE INC.			
DOCUMENT NUMBER: 27 - 3709255			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
SHEIDON FINLEY			
Name of Contact Person  JOFINNE ENTERPRISE  Firm/ Company			
4368 NW 17AVE			
Address  MIANI 7-1A 33142  City/ State and Zip Code			
THREE Finger Lange Cyato Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
SHeldon Finley at (954) 639-2242  Name of Contact Person at (954) 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 (Additional copy is enclosed) ☐ \$60 Certificate of Status (Additional Copy is enclosed) ☐ \$60 Certificate of Status (Additional Copy is enclosed)			
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment

to

Articles	of	Incorporat	tion
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	- FODOGE INC
	MERPRISES INC.
( <u>Name of Corporation</u> as <u>currently</u>	y filed with the Florida Dept. of State)
<u> </u>	13000031619
(Document Number of	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) to
A. If amending name, enter the new name of the corporation:	•
	N.C. The new
name must be distinguishable and contain the word "corporation," "C".  "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company, "or "incorporated" or the abbreviation "Corp., " professional corporation name must contain the word
B. Enter new principal office address, if applicable:	4368 NW 17AVE
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIAM 1,71A 33142
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4368 NW 17AVE MIAMI, ZIA. 3314Z
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent SHEIDON	1 timley
<u>~1368 ^</u>	JW ITAVE
New Registered Office Address: IAMI	(City) . Florida 33142 (Zip Code)
New Registered Agent's Signature, if changing Registered Agents I hereby accept the appointment as registered agent. I am familiar se	
Û,	

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: XChange	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Solones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	2	Myya Finlay	4368 NW 17ALL
Add			Minni 7/A 33142
Remove  2) Change	<u>CEO.</u>	SHeldon Finley	4368 NW 17AVE
× Add			MIAMI , 74A . 33142
Remove 3 ) Change <u>× Add</u>	TR	SHeldarius finley	MIAMI, 77AJE
Remove 4) Change Add	<u>vP</u>	SHeldrick finley	4368 NW 17105 WIFM: Pla 33142
Remove			
5) Change			
Add			
Remove			
6) Change			<del></del>
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)
DOFINAR ENTERPRISES JNC. CHANGE TO NUMBER Z WITHOUT THE S ENTERPRISE INE.
WITHOUT THE "S"
ON Offine Enterprise INE.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)  A  A

The date of each amendment was sign		4/22/22		, if other than the
Effective date <u>if applicable</u>	:			
	(ne	o more than 90 days af	ier amendment file date)	
Note: If the date inserted inscribed to date of the da	n this block does not m n the Department of Stat	neet the applicable stat te's records.	utory filing requirements, this da	te will not be listed as the
Adoption of Amendment(	i) ( <u>CHEC</u>	K ONE)		
The amendment(s) was/vaction was not required.	vere adopted by the inco	orporators, or board of	directors without shareholder action	on and shareholder
☐ The amendment(s) was/by the shareholders was			of votes cast for the amendment(	s)
			ing groups. The following statementately on the amendment(s):	ent
"The number of vo	tes cast for the amendm-	ent(s) was/were suffici	ent for approval	
by				
	(voting §	group)		
Dated Signature	(By a director, presiden	rator - if in the hands o	rectors or officers have not been of a receiver, trustee, or other cour	<del></del> 1
	-	SHELDON -	person signing)	
	(Title	holds e of person signing)	mly CEO	