## P18000 095 989

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## **COVER LETTER**

TO:	Amendment Section
	Division of Corporations

NAME OF CORPOR	ATION: LOTT	A ENTERP	PRISES, INC
DOCUMENT NUMB	ation: <u>LoTT</u> er: <u>P 1800</u>	0095989	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
	MICHAEL	GOLDSTEIN	
<del>-</del>		GOLD STEIN  Name of Contact Person	1
		ER.PRISES,	
-		Firm/ Company	
	9770 CAG	OPR	
-		Address	
_		BUN, FL 33	472
		City/ State and Zip Code	e
	E-mail address: (to be us	OUT COOK. CON	7 notification)
For further information	concerning this matter, pleas	e cali:	
MICH.	AEL GOLDSTE	EIN at 1 561	631 5946
Name of	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	urtment of State;
\$35 Filing Fee	543.75 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)
<u>M</u> aili	ng Address	Street .	Address

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

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

## **Articles of Amendment**

to

## Articles of Incorporation of

LOTTA ENTER PR	15ES, 1NO
	oration as currently filed with the Florida Dept. of State)
P 180000 95989	}
	ocument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the	ne corporation:
	m .
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	word "corporation," "company," or "incorporated" or the abbreviation "orp," "Inc," or "Co". A professional corporation name must contain the the abbreviation "P.A."
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)	able: ADDRESS )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u> )
D. If amending the registered agent and/or reg new registered agent and/or the new register	istered office address in Florida, enter the name of the red office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida 55
	(City) (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent	Registered Agent: nt. I am familiar with and accept the obligations of the position.
	Signature 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	PT	John D	<u>loe</u>	
X Remove	<u>v</u>	Mike J	ones	
X Add	<u>sv</u>	Sally S	<u>muth</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
() Change	PRI	<u> </u>	MICHAEL GOLDSTEIN	9770 LOGO DR
X Add				BOYNTON BERILD FC 33472
Remove				,
2) Change	V		CARLOTTA GOLDSTEIN	9770 LASO DR. BOYNTON BULL FC 33472
Remove				
3 ) Change		_		77
Add				
4) Change	<u></u>			
Add				5 65
5) Change		<del></del>		
Add				
Remove				
6) Change				
Add				<del></del>
Remove				

f amending or adding additional Articles, enter change(s) here:  Attach additional sheets, if necessary). (Be specific)	
	. 19 
	16 No.
	717
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	## 10: 
provisions for implementing the amendment if not contained in the amendment itself:	特別   <b>分</b>     表別   <b>5</b>
(if not applicable, indicate N/A)	37 S
N/A	
10163	
IVIA	
JOJA	
JOIA	
JOJA	
JOJA	

The date of each amendment(s) adoption: 8/5/19, if other than
date this document was signed.
Effective date <u>if applicable</u> :  (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 listed as 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 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
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action and shareholder.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 8/5/19
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)
CARCUTTA GOUDSTEIN  (Typed or printed name of person signing)
(Typed or printed name of person signing)
UICE PRES (Title of person signing)
(Title of person signing)