## P18CCC1014C5

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: I HOPE YOU NEVER NEED IT, INC.
DOCUMENT NUMBER: P18000101405
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JANET ROTSH TYN  Name of Contact Person
Firm/ Company
19411 NE 22 AUE Address
NORTH HIAMI BEACH FL 33180  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JANET ROTSHTYN at (305), 469-9466  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:
\$35 Filing Fee
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 Incorporation

of

•	of	<del>-</del>
I HOPE YOU NEVER	L NEED IT, INC	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	<u>.</u>
P1800010140	5	i i
	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the foll	owing amendment(s) to
A. If amending name, enter the new name of the corporation:		
BRITISH HOSPITALITY IN	C	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	"company," or "incorporated" or the abbre A professional corporation name must co	
B. Enter new principal office address, if applicable:	19411 NE 22 AVE	<del>-</del>
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	NORTH MIAHI B	EACH
	FL 33180	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	19411 NE 22 NORTH HIAMI	AVE BEACH
	FL 33180	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		
Name of New Registered Agent JANET R	20-TSHTYN	
19411 NE	E 22 AVE, NORTH H street address)	LIAMI BCH FL
New Registered Office Address: 1941 NE 22 Au	City)	33 (80) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	r with and accept the obligations of the posit	ion.
Signature of New	Registered Agent, if changing	
Check if applicable  The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	I) (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)

Example:

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.

X Change	<u>PT</u> <u>John</u>	<u>1 Doe</u>		
X Remove	<u>V</u> <u>Mik</u>	Mike Jones		
X Add	SV Sall	y Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change Add	<u> </u>	DAYNA ROTSHTYN	NORTH HIAHI BCH	
Remove 2) Change Add	_6_	SANET ROTSHTYN	PL 33180 19411 NE 22 NE NORTH HIAHI BC	
Remove 3) Remove Add			FL 33180	
Remove 4) Change Add				
Remove 5) Change Add		<u> </u>		
Remove 6) Change Add				

Attach additional sheets, i	dditional Articles, enter c if necessary). (Be specifi	c)		
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f an amendment provide	es for an exchange, reclas	sification, or cancella	tion of issued shares	
provisions for implemen	ting the amendment if n	ot contained in the am	endment itself:	•
(if not applicable, ind	dicate N/A)			
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The date of each amendment(s) adoption: _ date this document was signed.	11/1/2020	, if other than
Effective date <u>if applicable</u> :	11/12020	
	(no more than 90 days after ame	ndment file date)
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory fi of State's records.	ling requirements, this date will not be listed as
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the action was not required.	he incorporators, or board of director	s without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		es east for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each votice.	the shareholders through voting groung group entitled to vote separately of	ips. The following statement on the amendment(s):
"The number of votes cast for the an	nendment(s) was/were sufficient for	approval
bv		``
6	oting group)	
selected, by an ir	esident or other officer – if directors neorporator – if in the hands of a recently by that fiduciary)	
аррушка полок	, 0,	
<u> </u>	(Typed or printed name of person :	
	(Typed or printed name of person s	signing)
	305-469-9466	, President
	305-469-9466 (Title of person signing)	

the

the