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# COVER LETTER

Division of Corpor	rations		, ,	
NAME OF CORPOR	ATION: Tak	e Action	Entity	Inc.
DOCUMENT NUMB	er: <u>P                                   </u>	<u> </u>	343	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	oondence concerning this ma	tter to the following:		
	Jar	nes Br	かしい	
_	_	Name of Contact Person	1 1	<del></del>
-	Take	action & Firm/Company	ntity	Inc.
_	PO !	XX 1713	14	
	Mami	Address Gay devis	, A	33015
_	P	City/ State and Zip Cod	e	
	Takeach	on. Office	@ gmai	. Com
	E-mail address: (to be us	sed for future annual report	notification	
For further information	concerning this matter, pleas	se call:	•	
James o	Contact Person	at ( . ) Slo Area Co	de & Daytime Telephon	U) e Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)	5
Mail	ing Address	Street	Address	

TO: Amendment Section

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



2020 H. 7 23 · · · · · 9

Letter Number: 919A00025772

# FLORIDA DEPARTMENT OF STATE Division of Corporations

January 23, 2020

JAMES BROWN, JR. \*\*\*2ND MAILING\*\*\* 17600 NW 36TH AVENUE MIAMI GARDENS, FL 33056

SUBJECT: TAKEACTIONENTITYINC

Ref. Number: P1900005395

We have received your document and check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

www.sunbiz.org



December 18, 2019

JAMES BROWN POST OFFICE BOX 696764 MIAMI, FL 33169

SUBJECT: TAKEACTIONENTITYINC

Ref. Number: P19000005395

We have received your document and check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Claretha Golden Regulatory Specialist II

Letter Number: 919A00025772

# Articles of Amendment

to	رُد <del>*</del> -
Articles of Incorporation	
Takeaction Entity Inc. 2020 MAD 23	AH 10: 58
(Name of Corporation as currently filed with the Florida Dept. of State)	_
<u> </u>	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following an its Articles of Incorporation:	nendment(s) to
A. If amending name, enter the new name of the corporation:	
Take Action Entity Inc. Th	e new
name must be distinguishable and contain the word "corporation," "compark," or "incorporated" or the abbre	viation
"Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must cont	ain the

word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent (Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. Yam familiar with and accept the obligations of the position.

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)  1) Change	<u>Title</u>	Name  Soel Peguero	Address P.O. BOX 171311
Add Remove			Mami Gardens FL 33015
2) Change Add Remove		N/A	
3 ) Change Add			
Remove 4) Change Add		N/V	
Remove  5) Change Add		N/A	
Remove		-N/A	
Add			

Attach additional sheets, if neces	sary). (Be speci	fic)		
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		N/17		
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f an amendment provides for provisions for implementing t	he amendment if	not contained in the am	endment itself:	<b>7</b>
(if not applicable, indicate	N/A)	. 1 1 M		
		N/11		
		•		
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				·

The date of each amendment(s) adoption:	rebunar		2020	, if other than
date this document was signed.	~ .		)	
Effective date <u>if applicable</u> :	teburary	-1. 7	$\omega \omega =$	
•	(no more than 90 days after	r amendme	ent file date)	•
<b>Note:</b> If the date inserted in this block does document's effective date on the Department of		ory filing i	requirements, this d	late will not be listed as
Adoption of Amendment(s) (C	HECK ONE)			
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		votes east	for the amendment	.(s)
☐ The amendment(s) was/were approved by must be separately provided for each voting				vent
"The number of votes cast for the am	endment(s) was/were sufficient	for approv	val	
by			·	
(v	oting group)			
The amendment(s) was/were adopted by th action was not required.	e board of directors without sha	a <b>rch</b> older a	action and sharehold	der
☐ The amendment(s) was/were adopted by th action was not required.	e incorporators without shareho	older action	n and shareholder	
Febru	MMA 1 200	7.0		
Dated	1	$\cap$	٠. ۵	
Signature	us Duly	1	<u> </u>	<del></del>
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	ry by that fiduciary)		manue, or other con	
	Tomes (Typed or printed name of per	BY rson signin		. 71
	Descida		5/	
	(Title of person si	Y \\	<del> </del>	
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