## P19000009006

(Re	questor's Name)	
(Ad	dress)	_
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Nan	ne)
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Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	

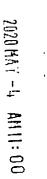
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: END DANIEL, CO	DRPORATION			
DOCUMENT NUMB	P19000009006				
The enclosed Articles of	f Amendment and fee are su	bmitted for tiling.			
Please return all corres	ondence concerning this ma	tter to the following:			
1	DANIEL ERNST				
-		Name of Contact Person	1		
1	END DANIEL CORPORATION				
-		Firm/ Company			
	027 NW 1ST AVE				
-		Address			
	FORT LAUDERDALE, FL 33311				
-		City/ State and Zip Cod	e		
1	EDCORPS05@GMAIL.COM				
-	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas		699-7940		
	f Contact Person	at (954	de & Daytime Telephone Number		
	the following amount made				
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

END DANIEL CORP		
(Name o	of Corporation as current	y filed with the Florida Dept. of State)
P19000009006		
	(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006. Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
N/A		The new
name must he distinguishable and contain "Inc.," or Co.," or the designation "Cochartered," "professional association,"	Corp," "Inc," or "Co"	company," or "incorporated" or the abbreviation "Corp.," 4-professional corporation name must contain the word
, ,		3723 FAIRVIEW COVE LN APT 301
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		TAMPA,FL 33619
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)  D. If amending the registered agent ar	OFFICE BOX)  nd/or registered office add	
new registered agent and/or the new	·	÷
Name of New Registered Agent N/A		<del></del>
	N/A	
	(Florida st	reet address)
New Registered Office Address:	N/A	, Florida
		(City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent tered agent. I am familiar	
	Signature of New k	egistered Agent, if changing

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)

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>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	$\nabla P$	EMLIE CHARLES	3723 FAIRVIEW COVE LN
X Add			APT 301
Remove			TAMPA, FL 33619
2) Change			
Add			
Remove Change	<del></del> .		
Add			
Remove			<del>-</del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attac	nending or adding additional Articles, ent ch additional sheets, if necessary). (Be sp	cific)			
	•				
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	<del></del>				
				<u> </u>	
lf an	amendment provides for an exchange, r	classification, or car	cellation of issued sl	nares,	
pro	visions for implementing the amendment (if not applicable, indicate N/A)	if not contained in th	ie amendment itself:	•	
	(у пол аррисиме, такале мя)				
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	04/27/2020	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:	04/27/2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	nek does not meet the applicable statutory filing requirements, surtinent of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted action was not required.	oted by the incorporators, or board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	nted by the shareholders. The number of votes cast for the amen ficient for approval.	dment(s)
☐ The amendment(s) was/were appromust be separately provided for a	oved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendments.	statement s):
"The number of votes east t	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
04/27/2020	^	
Dated	Thin	
Signature		
(By a dir	ector, president or other officer - if directors or officers have no	t been
	, by an incorporator - if in the hands of a receiver, trustee, or oth	ner court
appointe	d fiduciary by that fiduciary)	De a
_	- KASHA	JAN1Q
	(Typed or printed parmy of person signing)	,
	4.	
•	(Title of person signing)	,