P19000032549

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(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section

Division of Corpor			
NAME OF CORPOR.	ation: <u>+0</u> er: <u>P1900003</u>	LOVE HO	ME CO
DOCUMENT NUMB	er: <u>P1900003</u>	32549	
	f Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
_		MENY PA Name of Contact Person	liel
_	10 1	Name of Contact Person	n
-	-10 L	Pirm/ Company 1 / 8 5	1e co
		Firm/ Company	∠
-	3461 N	Address	
	Mindi		· El 32056
-	- 17447	City/ State and Zip Cod	fL 33056
		INER DOGG	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
	-		_
MER	PATHER	at (305	de & Daytime Telephone Number
Name	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depi	artment of State:
■ \$35 Filing Fee	S43.75 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)
	ing Address		Address
	ndment Section ion of Corporations		Iment Section on of Corporations
	Box 6327		entre of Tallahassee

2415 N. Monroe Street, Suite 810

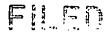
Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment

to

Articles of Incorporation



2021 NOV 22 PH 2: 33

to Lov.	//_ of		2021 801	24 FM 2-33
	<u> </u>	<u></u>		CRY OF STATE
_	f Corporation as current	ly filed with the Flori	da Dept. of State)!	MILIOSOFT, TE
F1900	0032549			
	(Document Number o	of Corporation (if know	vn)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpoi	ration adopts the follo	wing amendment(s) to
A. If amending name, enter the new na	ime of the corporation:			
				The new
name must he distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association," B. Enter new principal office address,	orp," "Inc," or "Co". A or the abbreviation "P.A."	A professional corpor	ration name must con	ntain the word
(Principal office address MUST BE A S	TREET ADDRESS)		andare	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		£2 30	3056	
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent		<u>s:</u>	the name of the	
	346/ Mac (Florida str	178	s /	
New Registered Office Address:	More: Ga	Roma	, Florida	33054
	•	(City)	(4)	Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	nanging Registered Agent ered agent. I am familiar	ti with and accept the ob	oligations of the position	on.
·	Signature of New R	Registered Agent, if cha	inging	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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:

Remove

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	PT	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	\nearrow	HERY PAINEL	344/ Alw 1785+ Miani Consons flage
Add			MIGHI Couldons \$2336
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

Attach additional sheets, if necessary).	(Be specific)
	
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6d	hanna anala wiffiantina an anna Batina a filiana d
provisions for implementing the amer	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

.

The date of each amendn date this document was sig	
Effective date if applicab	
<u></u>	(no more than 90 days after amendment file date)
Note: If the date inserted document's effective date	in this block does not meet the applicable statutory filing requirements, this date will not be listed as then the Department of State's records.
Adoption of Amendment	s) (CHECK ONE)
☑ The amendment(s) was action was not required. ☐ The amendment(s)	were adopted by the incorporators, or board of directors without shareholder action and shareholder
	were adopted by the shareholders. The number of votes cast for the amendment(s) s/were sufficient for approval.
	were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):
"The number of v	otes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
Dated	9/17/21
Signatur	(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) MENY PALIEN
	(Typed or printed name of person signing)
	President
	(Title of person signing)