P19000033426

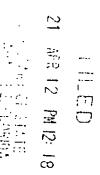
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: J. DECOR. INC					
DOCUMENT NUMI						
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	Zoran Pajkanovic					
	<u></u>	Name of Contact Persor	1			
	Our Bookkeepers Inc					
	· <u>-</u> -	Firm/ Company				
	13500 Beach Blvd Ste 45					
	Address					
	Jacksonville, FL 32224					
		City/ State and Zip Code				
	info@ourbookkeepers.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatio Zoran Pajkanovic	n concerning this matter. pleas		425-1238			
	of Contact Person	at (904)de & Daytime Telephone Number			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, F1, 32303			

Articles of Amendment

Articles of Incorporation

T De Car "Tac
(Name of Corporation as currently filed with the Florida Dept. of State)
P19000033426
(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 amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
904 ELS INC
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain 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:
new registered agent and/or the new registered outlet address.
Name of New Registered Agent
(Florida street address)
New Registered Office Address: (City) (Florida street address) (City) Florida Flor
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
Chack if applicable

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	
\underline{X} Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
l)Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		·	
Add			
Remove			
6) Change			
Add			
Remove			

	Attach additional sheets, if necessary). (Be specific)
	······································
-	
r. <u>I</u>	f an amendment provides for an exchange, reclassification, or cancellation of issued shares,
	provisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)

.

	04/05/2021	is at a sat
The date of each amendment(s date this document was signed.) adoption:	, if other than the
(04/05/2021	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file	date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing require Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the sufficient for approval.	te amendment(s)
	approved by the shareholders through voting groups. The fol- for each voting group entitled to vote separately on the amen	
"The number of votes o	ast for the amendment(s) was/were sufficient for approval	
by		
, — —	(voting group)	
04/05/2	021	
Dated	Tadraulia Staulon	•
soft	director, president or other officer – if directors or officers heted, by an incorporator – if in the hands of a receiver, trustee binted fiduciary by that fiduciary)	
	STANKOVIC, JAIDRANKA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

. . .