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COVER LETTER

Department of State Amendment Section

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: MARC BOSEM HOLO Enclosed are an original and one (1) copy of the restated articles of incorporation and a check for: □ \$43.75 □ \$43.75 □ \$52.50 Filing Fee Filing Fee Filing Fee. & Certified Copy & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

Name (Primed or typed)

2300 N. Compare Pkuy #308

Address

Weston F1 33326

City, State & Zip

954 442 133

Daytime Telephone number

Marc & Boson, Com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the document.

RESTATED ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

e name of the corporation	on is: <u> </u>	m Hola	ling, Inc	
RTICLE II RESTA e text of the Restated A	TEDARTICLES			
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Chanse	Registed	Agent		
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ARTICLE III OFFICERS AND/OR DIRECTORS (optional)

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:

 $P \neq President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doc 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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Joi	nes	
_X Add	<u>SV</u>	Sally Sm	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
I) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				1. (23)
3) Change				= 1 10
Add				
Remove				
4) Change		_		1,5 1,5 1,5 1,0
Add				\$60
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Commerce Pkry #38 Address: Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent ARTICLE VI ARTICLE CONSOLIDATION These restated articles of incorporation consolidate all amendments into a single document: ARTICLE VII REQUIRED ADOPTION INFORMATION Check if applicable: The amendment(s) is/are being filed pursuant to s. 607.0120(11)€. F.S. The date of each amendment(s) adoption is: if other than the date this document is signed. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of director without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. Then number of votes east for the amendment(s) by the shareholder was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting group. *The following* statement must be separately provided for each voting group entitled to vote separately on the amendment(s). "The number of votes cast for the amendment was/were sufficient for approval by

(voting group)

ARTICLE IV AMENDED REGISTERED AGENT (OPTIONAL)

	1 1
ARTICLE VIII EFFECTIVE DATE:	02/21/2000
Effective date, if other than the date of filir	$\frac{08/31/202}{30000000000000000000000000000000000$
	st be specific and cannot be more than 90 days after the filing.)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Dated: 8/26/2023

(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)

(Typed or printed name of person signing)

(Title of person signing)