P19000055204

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COVER LETTER

TO: Amendment Se Division of Co		,				
NAME OF CORPO	ORATION: T.O.K. Production	ns Inc.				
	1BER: P19000055204					
The enclosed Article	es of Amendment and fee are s	ubmitted for filing.				
Please return all cor	respondence concerning this ma	atter to the following:				
	Robert Raskin					
	-	Name of Contact Perso				
	T.O.K. Productions Inc.	The state of Contract Person				
	Firm/ Company					
	3231 nw 43rd Ave					
	Address					
	Fort Lauderdale, FL 33319					
		City/ State and Zip Cod	le			
	TOKD	OCBOXE	Domail. Col			
	h=maiFaddfess: (to be u	sed for future annual report	notification)			
For further informati	on concerning this matter, plea	se call:				
Robert Raskin		at (954	6826710			
Name	Name of Contact Person		de & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:			
■ \$35 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)			

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

T.O.K. Productions Inc.

P19000055204	n Corporation as curre	ntly filed with the Florid	a Dept. of State)	
1 1 7(KM)033204				
	(Document Number	of Corporation (if knowr	1)	
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corpora	tion adopts the followi	ng amendment(s) t
A. If amending name, enter the new na	me of the corporation:			
N/A				The new
name must be distinguishable and contain Inc.," or Co" or the designation "C Chartered." "professional association,"	orp," "Inc," or "Co".	A professional corpora	cated" or the abbreviat tion name must conta	ion "Corp"
B. Enter new principal office address, i Principal office address <u>MUST BE A ST</u>		N/A		
Enter new mailing address, if applie (Mailing address MAY BE A POST O		N/A		
				<u>.</u>
			-	- FE 4: 59
				
 If amending the registered agent and new registered agent and/or the new 	<u>d/or registered office ad</u> registered office addre	<u>dress in Florida, enter th</u> ss:	e name of the	25
·	N/A			
· · · · · · · · · · · · · · · · · · ·	 N/A			_
		treet address)	-	_
-	(Florida s			
New Registered Office Address:	(Florida s N/A		. Florida ^{N/A}	

Check if applicable

 \Box 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)

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. President. Treasurer. President.

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 Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	COP	KIMBERLY NICOLE BLACK	3231 NW 43RD AVE
Add			Fort Lauderdale, fl 33319
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
Α		
	_ _	
		
		
		-
		
		
		<u> </u>
<u> </u>		
1 an amendment provides for an excha	nge, reclassification, or cancellation of iss	ued shares,
(if not applicable, indicate N/A)	lment if not contained in the amendment	<u>itself:</u>
(g wa approxime, marche (vA)		

•

N/A The date of each amendment(s) adoption:
date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note : 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.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. 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(s) was/were sufficient for approval
by
(voting group)
7/29/2020 Dated Signature
(By a director, president of 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)