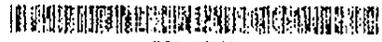


P19000072463

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the tax identification number shown below in the top right corner of the page in the adjacent

(EIN) (SSN) (99136-13) H24000149158



Note: DO NOT tick the "E-FILE RETURN" button on your laser-verified this page. Doing so will generate another cover sheet.

10. Department of Corporations  
Tax Number: (850) 487-3535

11. Account Name: MARY'S DISCOUNT INC  
Account Number: 14010600460  
Phone: (850) 324-1114  
Tax Number: (385) 628-1747

Match the email address for this address service to be used for future annual report filings. Enter only one email address, please.

Email Address: \_\_\_\_\_

COR AMND/RES/ATE/CORRECT OR OLD RENIN  
MARY'S DISCOUNT INC

Certificate of Change	b
Certificate of Incorporation	b
Page Count	0
Estimated Charge	\$12.00

Electronic Filing Method    Corporate Filing Method    Web

APR 24 11:48 AM '24  
STATE OF FLORIDA  
TALLAHASSEE, FL

2024 APR 24 PM 1:39

R. HUNT  
4/24/24

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Articles of Amendment  
to  
Articles of Incorporation  
of

MARY'S DISCOUNT INC

(Name of Corporation as currently filed with the Florida Dept. of State)

219000072403

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

..... The new 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:

Name of New Registered Agent

Florida street address

New Registered Office Address

Florida

(City)

(Zip Code)

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

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120(11)(a), F.S.

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MESSAGE, FL  
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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, Director would be PTT)

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 T and S. These should be noted as John Doe, PT as a Change Mike Jones, V as Remove, and Sally Smith, ST as an Add.

Example:

Change      P.T.      John Doe

Remove      V.      Mike Jones

Add      S.T.      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	VP	MARITZA GOMEZ	1155 n washington Blvd unit g SARASOTA FL 34236
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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F. If amending or adding additional Articles, enter change(s) here.  
*(Attach additional sheets, if necessary) (Be specific)*

PRESIDENT: ALEXIS PINO 100% Stockholder 1155 N. Washington Blvd Unit C Sarasota FL 34236

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STATE OF FLORIDA  
TALLAHASSEE, FL

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F. If 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)*

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04/24/2024

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

04/24/2024

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 incorporator, 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)

Dated 04/24/2024  
Signature \_\_\_\_\_  
\_\_\_\_\_  
(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)

Alexis Puro

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)

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TALLAHASSEE, FL  
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