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TEPARTHENT OF STATE

VALUE OF CORPORATION

TALLAHASSEE, FLURINGS

MAR 23 2020 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Sure Been Nice, In	c	
DOCUMENT NUMI	P10000084311		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Aileen Nicol Sherbin		
		Name of Contact Person	
	Sure Been Nice, Inc		
	-	Firm/ Company	
	13319 Bovet Avenue		
		Address	
	Orlando, Florida 32827	<u></u>	
		City/ State and Zip Code	
	Nicky.Sherbin@aplaceathom	e.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio Katrina Burgos	n concerning this matter, pleas	se call: at (⁴⁰⁷	565-7600
Name of Contact Person			le & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	□S43.75 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)
Am Div P.O	endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amendi Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee l. Monroe Street, Suite 810 essee, FL 32303

Articles of Amendment to Articles of Incorporation of

Sure Been Nice, Inc	is currently filed with the Flori	da Dent of State)	
P19000084311	is currently filed with the Fiori	and the pri, or state,	
(Document	Number of Corporation (if know	vn)	
Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation:	atutes, this Florida Profit Corpor	ration adopts the following amen	idment(s) t
A. If amending name, enter the new name of the corpo	oration:		
		The	new
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviat	· "Co". A professional corpo	vorated" or the abbreviation "Contain the value of the va	rp.,'' word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2020 HAR - L AM NAME OF CORPUT TALLANDASSEE OF	71 77
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	(City)	Florida(Zip Code)	
	ren,i/	(Dip Sourcy	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		bligations of the position.	
Signatur	e of New Registered Agent, if ch	anging	
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)

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.

Example: X Change	<u>PT</u>	John Doe				
X Remove	<u>V</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address			
1) Change	PSTD	Stephen Sherbin	13319 Bovet Avenue			
Add			Orlando, FL 32827			
X Remove						
2) Change	PSTD	Aileen Sherbin	13319 Bovet Avenue			
X Add			Orlando, FL			
Remove 3) Remove						
Add						
Remove						
4) Change						
Add			-			
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

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	3/1/2020	to a a a
The date of each : date this document	amendment(s) adoption:	, if other than the
date this documen	3/1/2020	
Effective date <u>if a</u>	applicable:	
	(no more than 90 days after amendment file date)	
Note: If the date document's effecti	inserted in this block does not meet the applicable statutory filing requirements, this ive date on the Department of State's records.	date will not be listed as the
Adoption of Ame	endment(s) (<u>CHECK ONE</u>)	
The amendmen action was not	nt(s) was/were adopted by the incorporators, or board of directors without shareholder a required.	ction and shareholder
	nt(s) was/were adopted by the shareholders. The number of votes cast for the amendme olders was/were sufficient for approval.	nt(s)
	nt(s) was/were approved by the shareholders through voting groups. The following state ately provided for each voting group entitled to vote separately on the amendment(s):	ement ement
"The nun	mber of votes cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	03/03/2020	
	Dated	
	Signature Allun Muh	
	(By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	on ourt
	Aileen Sherbin	
	(Typed or printed name of person signing)	
	PSTD (President/Secretary/Treasurer/Director)	
	(Title of person signing)	