PZCOCO 14144

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Dx	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: TALUS INVESTI	MENTS, INC.			
	IBER: P20000014144				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Kenneth V. Hemmerle, II				
	Name of Contact Person				
Kenneth V. Hemmerle, II, P.A.					
Firm/ Company					
	1322 N.E. 4th Avenue, Suite	Е			
Address					
	Fort Lauderdale, Florida 3330	04		72	
	City/ State and Zip Code			5. e.j	
	KVHIILAW@aol.com			H-H "' <u>C</u>	
	E-mail address: (to be us	sed for future annual repo	rt notification)	•;	
For further informati	on concerning this matter, pleas	se call:		The second	
Kenneth V. Hemmer	rle, II	954 at (768-9116		
Name	e of Contact Person	Area C	Code & Daytime Telephone Nu	mber	
Enclosed is a check t	for the following amount made	payable to the Florida De	partment of State:		
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amer Divis The 0 2415	et Address Indment Section It ion of Corporations Centre of Tallahassee IN. Monroe Street, Suite 819 In hassee, FL 32303	0	

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Articles of Amendment to Articles of Incorporation of

ITALUS INVESTMENTS, INC.			
(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
P20000014144			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the fo	ollowing amend	dment(s) to
A. If amending name, enter the new name of the corporation:			
			new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must		
B. Enter new principal office address, if applicable:	12555 Orange Drive		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite 239		_
	Davie, FL 33330		
		- 3	9 078
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12555 Orange Drive	S	<u>.</u>
	Suite 239	\$-50 	=
	Davie, FL 33330	۸	
D. If amending the registered agent and/or registered office ad	drass in Florida antar the name of the	ुन्हां कुन्हां	ے م
new registered agent and/or the new registered office addre			29
Name of New Registered Agent			
(Floridu s	treet address)		
New Registered Office Address:	, Florida		
	(City)	(Zip Code)	
· ·	, Florida	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian		sition.	

Signature of New Registered Agent, if changing

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, a address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Remove

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 = Chi Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office helpersident, 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)	Title	<u>Name</u>	Address
1) X Change	ST	James T. Boccuzzi	12555 Orange Drive
Add			Suite 239
Remove			Davic, FL 33330
2) Change	ST	Elissa Kurland	12555 Orange Drive
X Add			Suite 239
Remove 3) Change			Davie, FL 33330
Add			2029
Remove			
4) Change		_	\$ 72 P
Add			<u> </u>
Remove			9: 29
5) Change			
Add			
Remove			
δ) Change			
Add			

October 9, 2020	
The date of each amendment(s) adoption:	, if other than
date this document was signed.	
October 9, 2020 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 require document's effective date on the Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without staction was not required.	narcholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The fo must be separately provided for each voting group entitled to vote separately on the amendment.	· ·
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
	2020 OCT
O-table - 0, 2020	
October 9, 2020 Dated	
Duict	منجون بني المرتق أو
	製造 2 上
Signature	have not been = 1
(By a director, president or other officer – if directors or officers	÷/∆
selected, by an incorporator – if in the hands of a receiver, truste	19.7
appointed fiduciary by that fiduciary)	## 2 9
James T. Boccuzzi	; W
(Typed or printed name of person signing)	
President and Director	
(Title of person signing)	