Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:	Division of Corporations		
	Fax Number : (850)617-6380		
From:			•
	Account Name : ASSURED ACCOUNTING AND Account Number : I20180000048	TAX SERVICES	
	Phone : (954)793-0353		20
	Fax Number : (954)944-3163		22
			2022 SEP
**	Enter the email address for this business	entity to be used for	future 👱 . 💆
	annual report mailings. Enter only one	email address please.	future DHASSE
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Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment

(((H22000314039 3)))

	to Articles of Inco	orporation	
	of		
	MOISELLE HAIF		_
(Name of	Corporation as currently	filed with the Florida Dept. of State)	
	P200000209		_
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this A	Florida Profit Corporation adopts the following amendment(s)	lo
A. If amending name, eater the new name	me of the corporation:		
		The new	
name must be distinguishable and contain to "Inc.," or Co.," or the designation "Co. "chartered," "professional association,"	orp," "Inc," or "Co". A	company," or "incorporated" or the abbreviation "Corp.," I professional corporation name must contain the word	
B. Enter new principal office address. I	f applicable:	104 ASHOURIAN AVE STE 108	
(Principal office address MUST BE A ST	REET ADDRESS)	ST. AUGUSTINE, FL 32092	
		2 S	
			-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		104 ASHOURIAN AVE STE 108∾	}
		ST. AUGUSTINE, FL 32092	
D. If amending the registered agent an	d/or registered affice add	costs in Florida, enter the name of the	
new registered agent and/or the new	registered office address	<u>E</u>	
Name of New Registered Agent	SAMANTHA PI	ERRE-FRANCOIS	
	104 ASHOURIA	N AVE STE 108	
	(Florida str	revi uddress)	
New Registered Office Address:	ST. AUGUSTIN		
		(City) (Zip Code)	
New Registered Agent's Signature, if cl	hanoing Registered Agent	t:	
I herehy accept the appointment as regist	ered agent. I am familiar	with and accept the obligations of the position.	
	Samantha françois (Sep 10.7	2022 08:27 EDT)	
		Registered Agent, If changing	
	- ·		

Check if applicable

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

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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 = ChiefExecutive 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	n Doe	
X Remove	<u>v</u> <u>Mil</u>	te Jone s	
_X Add		y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>s</u>	Victoria Heining	84 Sarah Elizabeth Dr
Add			St. Johns, FL 32259
X Remove			
2) X Change	<u>T</u>	Fabricia Costa	104 Ashourian Ave Ste 108
Add			St. Augustine, FL 32092
Remove 3) X Change	P	Samantha Pierre-Francois	104 Ashourian Ave Ste 108
Add			St. Augustine, FL 32092
Remove			——————————————————————————————————————
4) Change			8
Add			
Remove		•	
5)Change			
Add			
Remove			
6)Change			
Add	•		
Remove			

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ttach additional sheets, if necessary). (Be specific)	(((H2200031403
	
	
	
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an amendment provides for an exchange, reclassification, or cancellation of issued shares, providing for implementing the amendment if not contained in the amendment itself:	SE R
i 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)	SE R
provisions for implementing the amendment if not contained in the amendment itself:	SE R
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	SE R
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	SE R
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	SE R
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	SE R
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	SE R

		(((H220003140393)))
The date of each amondm		, if other than the
date this document was sign	ned.	
Effective date <u>if applicabl</u>	e:	<u></u>
	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will be department of State's records.	ll not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/action was not required.	were adopted by the incorporators, or hoard of directors without shareholder action and	d shareholder
	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):	
"The number of ve	otes cast for the amendment(s) was/were sufficient for approval	
by	,	
<u>-</u>	(voting group)	201
,	2 - 40 0000	-
Dated	Sep 10, 2022	FILE 2022 SEP 12
_	4-46-1	
Signature	Samantha Mancois (Sep 10, 2022 08:27 EDT)	Or man
	(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)	AM 8: 18
	Samantha Pierre-François	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	