## P200000 21819

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	N: All ahout	- ASSOYS Inc		
DOCUMENT NUMBER: _	P200000218	,(Q		
The enclosed Articles of Ame	endment and fee are sub	omitted for filing.		
Please return all corresponder	nce concerning this mat	tter to the following:		
	Julea	Te Ho ( ) ( Name of Contact Person		
	пи	about Asset	5 inc	
- I. A		Firm/ Company	1.	
541	ow Stot	C YOOD BY b Address	ay 4	
	No. a		l .	
	Day Le	FLO(Id u 37. City/ State and Zip Code	214	<del></del>
E-For further information conce		tSinc @9mail. Co ed for future annual report e call:	notification)	Q65g
Judda Telfo	(A Jr.	at ( 786	, 589	0
Name of Cont	act Person	Area Coo	le & Daytime	Telephone Number
Enclosed is a check for the fo	llowing amount made p	payable to the Florida Depa	ertment of State	e:
<del>-</del>	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Fi Certificate Certified C (Additional is enclose	e of Status Copy al Copy
Mailing Ad			Address	
	Amendment Section Amendment Section Division of Corporations Division of Corporations		ons	
P.O. Box 63	D. Box 6327 The Centre of Tallahassee			
Tallahassee	, FL 32314		l. Monroe Str ssee, FL 3230:	reet, Suite 810 3

## Articles of Amendment to Articles of Incorporation of

ALL ABOUT ASSETS INC

<del></del>	tly filed with the Florida Dept. of State)
P2000007	21819
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The 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 contain the word
B. Enter new principal office address, if applicable:	5410 W State 500d 84
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	bay 4 , Dav. P FL 33314
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	Sylo W State 60Gd 84
	hay 4, Davie FL 33314
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
•	(City) (Zip Code)
Non-Donie and American Statement (6.1), and a Donie and American	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
	202
Signature of New 1	Registered Agent, if changing
-	
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	) (e), F.S.
	<u> </u>

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>(10</u>	Judged Telfort Dr	5410 W Sture (00284
Add			bay 4 Davie FL
Remove			33314
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			<del></del>
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
	_	
1 6 6 6 4 feet		
,		
f an amendment provides for an excl	ange, reclassification, or cancellation	of issued shares,
provisions for implementing the amo	ndment if not contained in the amend	ment itself:
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:date this document was signed.	, if other than the
•	
Effective date <u>if applicable</u> : (no more than 90 days o	fter amendment file date)
Note: If the date inserted in this block does not meet the applicable stadocument's effective date on the Department of State's records.	ntutory filing requirements, 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 action was not required.	directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	er of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vo must be separately provided for each voting group entitled to vote sep	
"The number of votes cast for the amendment(s) was/were suffic	cient for approval
by	
(voting group)	
Dated	
(By a director, president or other officer – if of selected by an incorporator – if in the hands appointed fiduciary by that fiduciary)	
Juded Te	1fact 11.
(Typed or printed name of	person signing)
Ceo	
(Title of person signing)	