## P200000 31372

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
		<u>.</u>





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SEP 25 TOTAL

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: MatchMakers Plu	s, Inc	
	JMBER:		
The enclosed Artic	cles of Amendment and fee are su	ibmitted for filing.	
Please return all co	orrespondence concerning this ma	atter to the following:	
	Timothy Gibb		
	<del></del> :	Name of Contact Person	
	MatchMakers Plus, Inc		
	Firm/ Company		
	25487 Hawks Run Ln		
		Address	
	Sorrento, FL 32776		
		City/ State and Zip Code	2
	tgibb@matchmakersplus.con	n	
	E-mail address: (to be us	sed for future annual report	notification)
For further inform Timothy Gibb	ation concerning this matter, plea	0.41	404-0055
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made		
S35 Filing Fee	© \$43.75 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)
	Mailing Address Amendment Section Division of Corporations	Amend	Address ment Section n of Corporations

## **Articles of Amendment** to Articles of Incorporation of

MATCHMAKERS PLUS, INC.

(Name of Corporation as curren	tly filed with the Florida	Dept. of State)	
P20000031372		, <u> </u>	
(Document Number	of Corporation (if known	)	·
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corpora	tion adopts the follo	wing amendment(s) to
A. If amending name, enter the new name of the corporation:			
N/A			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 corporat		iation "Corp.,"
B. Enter new principal office address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS)		·	
		·	
	<del></del>		<del></del>
C. Enter new mailing address, if applicable:			653
(Mailing address MAY BE A POST OFFICE BOX)	N/A ——————		· · · · · · · · · · · · · · · · · · ·
			· -
			7:
	-	· · · · · · · · · · · · · · · · · · ·	<u></u>
D. If amending the registered agent and/or registered office ad-		ne name of the	:5 :5
new registered agent and/or the new registered office addres	<u>ss:</u>		
Name of New Registered Agent N/A	<del></del>		
		··	
	treet address)		
New Registered Office Address: N/A		, Florida	<del></del>
	(City)	(2	Zip Code)
New Registered Agent's Signature, if changing Registered Agen	***		
I hereby accept the appointment as registered agent. I am familiar		gations of the positio	on.
C'	Desired to the second of the second		
Signature of New	Registered Agent, if chang	ging	
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>	<u>Addres</u> s
1) Change	VSD	Natacha Noel	219 Holly Street
X Add			Cranford, NJ 07016
Remove			
2) X Change	PTD	Timothy Gibb	25487 Hawks Run Ln
Add			Sorrento, FL 32776
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	additional sheets, if necessary). (Be specific)  ng Article IV	
The number	er of shares the corporation is authorized to issue:	
* Change	FROM 10,000 (ten thousand) shares TO 100,000 (one hundred thousand) shares	
<del></del>		
	<u></u>	
	· ·	
<del></del>		
<u>provis</u> (i/	mendment provides for an exchange, reclassification, or cancellation of issued shares, ions for implementing the amendment if not contained in the amendment itself:  I not applicable, indicate N/A)	
N/A		

The date of each am	endment(s) adoption:	
date this document wa		
	N/A	
Effective date <u>if app</u>	licable:  (no more than 90 days after amendment file date)	<u> </u>
	serted in this block does not meet the applicable statutory filing requirements, the date on the Department of State's records.	is date will not be listed as the
Adoption of Amend	ment(s) ( <u>CHECK ONE</u> )	
The amendment(s) action was not req	) was/were adopted by the incorporators, or board of directors without shareholden uired.	action and shareholder
• .	) was/were adopted by the shareholders. The number of votes cast for the amendr rs was/were sufficient for approval.	nent(s)
	) was/were approved by the shareholders through voting groups. The following startly provided for each voting group entitled to vote separately on the amendment(s):	
"The numbe	r of votes cast for the amendment(s) was/were sufficient for approval	
by	<b></b>	
,	(voting group)	
	July 27, 2020	
Dat	ted	
Sig	mature	
	(By a director president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
	Timothy Gibb	
	(Typed or printed name of person signing)	
	PSTD	
	(Title of person signing)	