## P20000 37599

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## **COVER LETTER**

| Division of Corporations   | 1   |
|--|---|
| NAME OF CORPORATION: LaGra   | à Company Inc.  |
| DOCUMENT NUMBER: <u> </u>  | 37599   |
| The enclosed Articles of Amendment and fee are s                         | submitted for filing.   |
| Please return all correspondence concerning this m                       | natter to the following:  |
| LaCa   | ora Johnson   |
| LaCon  | Name of Contact Person  A & Company Inc.  |
| 216 E.   | College Street 6  |
| Tallahas   | SSee Florida. 32302<br>City/ State and Zip Code                                     |
|  | ora and Compan . Com used for future annual report notification)                    |
| For further information concerning this matter, ple                      | ease call:  |
| La Cora Johnson  | at (850) 508 2411   |
| Name of Contact Person   | Area Code & Daytime Telephone Number  |
| Enclosed is a check for the following amount made                        | le payable to the Florida Department of State:                                      |
| □ \$35 Filing Fee  |   |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | Street Address Amendment Section Division of Corporations The Centre of Tallahassee |

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently  | filed with the Florida Dept. of State)  |
|--|---|
| 1 20000 37599  | _   |
| (Document Number of  | Corporation (if known)  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:  | Ilorida Profit Corporation adopts the following amendment(s) to   |
| A. If amending name, enter the new name of the corporation:  |   |
| La Cora & Company Inc.   | The new   |
| name must be distinguishable and contain the word "corporation." "co<br>"Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A<br>"chartered," "professional association," or the abbreviation "P.A."   | ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word |
| B. Enter new principal office address, if applicable:  | 216 E College St. 61  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | Tallahassee, 74. 32301  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | P.O. Box 61   |
|  | Jallahassee, M. 32362   |
| D. If amending the registered agent and/or registered office addr<br>new registered agent and/or the new registered office address:  | ess in Florida, enter the name of the   |
| Name of New Registered Agent  Do Pour  | Johnson<br>-61 - 216 E. Collège St.   |
| (Florida stre  | ret address)  |
| New Registered Office Address: Talahasse   | City) Florida 32302 (Zip Code)  |
|  |   |
| New Registered Agent's Signature, if changing Registered Agent:<br>I hereby accept the appointment as registered agent. Fam familiar w   | ith and accept the obligations of the position.   |
| The same approximation of the same and the same are same as the same are sa |   |
| Signature of New R   | egistered Agent, if changing  |

Check if applicable

☐ The amendment(s) is/are being filed pursuant t so s. 607.0120 (11) (c), 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)

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 = 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> <u>John D</u>  | <u>oe</u>       |                                  |
|---|--------------------------|-----------------|----------------------------------|
| X Remove                                  | <u>V</u> <u>Mike J</u>   | ones            |                                  |
| X Add                                     | <u>SV</u> <u>Sally S</u> | <u>mith</u>     |                                  |
| Type of Action (Check One)  1) Change Add | CED,<br>President        | La Cora Johnson | P.O. Box 61 Tallahassee FL 32307 |
| Remove 2) Change Add                      | <del></del>              |                 |                                  |
| Remove 3) Change                          |                          |                 |                                  |
| Add Remove                                |                          |                 | • )                              |
| 4) Change Add                             |                          |                 |                                  |
| Remove 5) Change Add                      |                          |                 |                                  |
| Remove 6) Change Add                      |                          |                 |                                  |
|   |                          |                 |                                  |

| If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)  |              |
|---|--------------|
|   |              |
|   |              |
| Name Charge   |              |
|   |              |
| Lacora Handstora  |              |
| a Cora Thhoson  |              |
| Lacora Johnson  |              |
|   |              |
|   | -            |
|   |              |
|   |              |
|   | ~·           |
|   | -:           |
|   |              |
|   |              |
| If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: | <del>-</del> |
| (if not applicable, indicate N/A)   | ù            |
|   |              |
|   |              |
|   |              |
|   | <del></del>  |
|   |              |
|   |              |
|   |              |

· . .

| The date of each amendment(s) ado  | ption:   | , if other than the         |
|--|--|-----------------------------|
| date this document was signed.   | 11.8.23  |                             |
| Effective date <u>if applicable</u> :  | (no more than 90 days after amendment file date)   | <del></del>                 |
| Note: If the date inserted in this blod document's effective date on the Department. | ck does not meet the applicable statutory filing requirements, this date artment of State's records.   | e will not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )   |                             |
| ☐ The amendment(s) was/were adopt action was not required.                           | ted by the incorporators, or board of directors without shareholder actio  | n and shareholder           |
| The amendment(s) was/were adop by the shareholders was/were suff                     | ted by the shareholders. The number of votes cast for the amendment(s ficient for approval.  | )                           |
| ☐ The amendment(s) was/were appromust be separately provided for each                | oved by the shareholders through voting groups. The following stateme<br>ach voting group entitled to vote separately on the amendment(s):               | nt                          |
|  | or the amendment(s) was/were sufficient for approval   |                             |
| by Lalo  | (voting group)   |                             |
| Dated  | 1/. 8. 23  | 72                          |
| Signature  | Mhuso  | · •                         |
| (By a dir  | pector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other cour | 1<br>1                      |
| appointe   | ed fideciary by that fiduciary)  | •                           |
|  | LaGra Johnson  | <del></del>                 |
| -  | (Typed or printed name of person signing)  | , <del>~</del> i            |
|  | (Fo, Presigny  |                             |