P20 000039394

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PICK-UP	WAIT	MAIL
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COVER LETTER

TO: Amendment Sect Division of Corpo			i ii
NAME OF CORPOR	RATION: SURO HOLDINGS	S INC	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Elizabeth Zamora		
	-	Name of Contact Pers	son
	VZ Accouting Services Inc.		
		Firm/ Company	
	2700 W Cypress Creek RD, I	• •	
		Address	
	Fort Lauderdale FL 33309		
		City/ State and Zip Co	ode
	Elizabeth@vzaccountingserv	ices.com	
	E-mail address: (to be us	ed for future annual repo	ort notification)
For further information	n concerning this matter, pleas	se call:	
Elizabeth Zamora		at (598-2994
Name o	of Contact Person	Area (Code & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida De	epartment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Ame Divi The 241	ndment Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 shassee, FL 32303

Articles of Amendment Articles of Incorporation of

SURO HOLDINGS INC		· . ②
(Name o	of Corporation as currently	filed with the Florida Dept. of State)
P20000039394		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	Ilorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		10781 NW 18th CT
		Plantation FL 33322
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10781 NW 18th CT
		Plantation FL 33322
D. If amending the registered agent an new registered agent and/or the new		ess in Florida, enter the name of the
Name of New Registered Agent	VZ Accounting Services Inc	<u></u>
	2700 W Cypress Creek RD.	D123
	tFlorida stree	ei address)
New Registered Office Address:	Fort Lauderdale	, Florida 33309
	(0	City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 PT John Doe \underline{X} Remove $\underline{\mathbf{V}}$ Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action <u>Title</u> Name Address (Check One) VΡ Christopher Ruwe 10781 NW 18th CT 1) ____ Change Plantation FL 33322 ___ Add ____ Remove Michael Suro 2) X Change P 10781 NW 18th CT Plantation, FL 33322 ____ Add ____ Remove 3) ___ Change ___ Add ____ Remove 4) ____ Change ____ Add ____ Remove 5) ____ Change ____ Add __ Remove 6) ____ Change ____ Add Remove

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
	
If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y nor appreciate, transact (v/r)	

	10/01/2020	
The date of each amendment(s) a	doption:	, if other than th
date this document was signed.		
10/9	01/2020	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this l document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	is date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmufficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
10/01/2020 Dated	Me Iz	
(By a c selecte	lirector, president or other officer – if directors or officers have not bed, by an incorporator – if in the hands of a receiver, trustee, or other sted fiduciary by that fiduciary)	
	Michael Suro	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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