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# **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Blue JAI ACARRAY & ALLY CAST ITS  DOCUMENT NUMBER: P2000039847
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MICHIP BIANDI
Name of Contact Person
2312 Will Firm/ Company #10
MITON MANOVS FI 333 OK
MDB479 PGMAIL COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (561) 2PG-F54/ Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee  \$\Bigcup \text{\$\frac{1}{2}\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)} \$\Bigcup \text{\$\frac{1}{2}\$43.75 Filing Fee & Certificate of Status (Certificate of Status (Additional copy is enclosed)} \$\Bigcup \text{\$\frac{1}{2}\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)} \$\Bigcup \text{\$\frac{1}{2}\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)} \$\Bigcup \text{\$\frac{1}{2}\$} \Bigcup \Bigcup \text{\$\frac{1}{2}\$} \Bigcup \Big

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# Articles of Amendment

to

	Articles of Incorporation
1) UZ A1 TOAKM	y of Min COASI) VBC
(Name of Corporation	on as currently filed with the Florida Dept. of State)
<u>PH(10000) 575</u>	<u> </u>
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this $\emph{Florida Profit Corporation}$ adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The new proporation," "company, "or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "P.A."
B. Enter new principal office address, if applicable	<u> </u>
(Principal office address <u>MUST BE A STREET ADD</u>	RESS)
	<u> </u>
C. Enter new mailing address, if applicable:	කු
(Mailing address <u>MAY BE A POST OFFICE BO.</u>	<u> </u>
D. If amending the registered agent and/or register new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
Name David Amend Amend's Cincolous of the size David	Canada ana
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	Mered Agent: I am familiar with and accept the obligations of the position.
Siona	ture of New Registered Agent, if changing
	with the state of

Check if applicable  $\Box$  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)

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	P1 John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)  1) Change	P Name Mitch MAKKT	Address  BIL MITHINIU
Add Remove  2) Change Add	P CHUKFUTZ	924 SE 7h 57 FI. LAWINGE FI 33301
Remove 3 )		
Remove 4)ChangeAdd		
Remove 5)ChangeAdd		
Remove Change Add		
Remove		

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
· · · · · · · · · · · · · · · · · · ·	
F. 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:  (if not applicable, indicate N/A)	
<del></del>	

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The date of each amendment(s) adoption: _	6/5/20	, if other than the
date this document was signed.	6/f/20	
Effective date <u>if applicable</u> :	(no more than 90 days after amendmen	t file date)
Note: If the date inserted in this block does document's effective date on the Department		equirements, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
☐ The amendment(s) was/were adopted by the action was not required.	ne incorporators, or board of directors with	out shareholder action and shareholder
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voting	the shareholders through voting groups. The group entitled to vote separately on the d	
"The number of votes east for the am	iendment(s) was/were sufficient for approv	al
by		
Dated	oting group)	
selected, by an in	esident or other officer – if directors or officer or officer – if in the hands of a receiver, try by that fiduciary)	
	MITHOUP B	1841)
	(Typed or printed name of person signing	()
	[/, K)	<del></del>
	(Title of person signing)	