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| (Requestor's Name                       | )            |  |  |  |
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| PICK-UP WAIT                            | MAIL         |  |  |  |
| (Business Entity Na                     | ame)         |  |  |  |
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| Special Instructions to Filing Officer: |              |  |  |  |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATI            | ION: Veronite                             | a Meyers ?   | A   |
|------------------------------|---|--|---|
| DOCUMENT NUMBER:             | P2001                                     | a Meyers, P<br>0004/258  |   |
| The enclosed Articles of A   | mendment and fee are su                   | bmitted for filing.  |   |
| Please return all correspond | lence concerning this ma                  | tter to the following:   |   |
|                              | Ve  | Name of Contact Person   |   |
|                              | ·   | Name of Contact Person   | 1   |
|                              | V   | erouika Meyers, Firm/Company                                     | PA  |
|                              |   | • •  |   |
|                              | 159                                       | 17 Pinewed R<br>Address  | d.  |
|                              |   | Address  |   |
|                              | Ŧ.  | rt Myurs FL 37°<br>Cityl State and Zip Cod                       | 119   |
|                              |   | City. State and Zip Cod  | e   |
|                              | Veronika                                  | meyers @ cmail   | . com   |
| <del></del>                  |   | sed for future annual report                                     |   |
|                              |   |  |   |
| For further information con  | cerning this matter, pleas                | se call:   |   |
| Vennika Me                   | yvis                                      | at ( 239   | 246 – 5786<br>de & Daytime Telephone Number   |
| Name of Co                   | ntact Person                              | Area Co  | de & Daytime Telephone Number   |
| Enclosed is a check for the  | following amount made                     | payable to the Florida Depa                                      | artment of State:   |
| S35 Filing Fee               | S43.75 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)      |
| Division<br>P.O. Box         | ent Section<br>of Corporations            | Amend<br>Divisio<br>The C  | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

of

| Veronita Meye  |  |                   |
|--|--|-------------------|
| \(\frac{1}{2} \)   | filed with the Florida Dept. of State)         |                   |
| 7200004  |  |                   |
| (Document Number of C  | Corporation (if known)                         |                   |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this $F_0$ its Articles of Incorporation:  | lorida 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," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." |  |                   |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  |  |                   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  |  | 2002              |
|  |  | :<br>:            |
| D. If amending the registered agent and/or registered office address:  | ss in Florida, enter the name of the           | P) 2: 13          |
| Name of New Registered Agent   |  |                   |
|  |  |                   |
| (Florida stree   | t address)                                     |                   |
| New Registered Office Address:   | , Florida                                      |                   |
|  | City) (Zip C                                   | ode)              |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with  | th and accept the obligations of the position. |                   |
| Signature of New Reg   | ristered Agent, if changing                    |                   |

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)

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                 |                     |
|-------------------------------|-----------------------------|---------------------|
| X Remove                      | V Mike Jones                |                     |
| X Add                         | SV Sally Smith              |                     |
| Type of Action<br>(Check One) | <u>Title</u> <u>Name</u>    | Address             |
| 1) Change                     | President P Veronika Meyers | 1547 Pineured Rd    |
| X Add                         | 1                           | Fort Myers, FL 3391 |
| Remove                        |                             |                     |
| 2) Change                     |                             | -                   |
| Add                           |                             |                     |
| Remove 3) Change              |                             |                     |
| Add                           |                             |                     |
| Remove                        |                             |                     |
| 4) Change                     |                             |                     |
| Add                           |                             |                     |
| Remove                        |                             |                     |
| 5) Change                     | <del></del>                 |                     |
| Add                           |                             |                     |
| Remove                        |                             |                     |
| 6) Change                     |                             | - <u> </u>          |
| Add                           |                             |                     |
| Remove                        |                             |                     |

| tach <i>ac</i> | ling or ad<br>dditional s | ding addition the distribution in the distribution distribution in the distribution in | onal Articles,<br>essary). (Bo        | <u>enter chang</u><br>e specific) | <u>(e(s) here</u> : |                            |                                     |              |  |
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| <u>rovisio</u> | o <u>ns for</u> im        | plementing   | an exchange                           | e, reclassifica                   | ition, or car       | ncellation of<br>he amendm | <u>'issued share</u><br>ent itself: | <u>s.</u>    |  |
| (if n          | ot applica                | ble, indicate  | · N/A)                                |                                   |                     |                            |                                     |              |  |
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| The date of each amendment(s) adoption: date this document was signed.                             | 07/29/2020 if other than   |
|--|--|
| Effective date if applicable:  |  |
|  | (no more than 90 days after amendment file date)   |
| Note: If the date inserted in this block does no<br>document's effective date on the Department of | ot meet the applicable statutory filing requirements, this date will not be listed as State's records.                           |
| Adoption of Amendment(s) ( <u>CH</u>   | ECK ONE)   |
| ★ The amendment(s) was/were adopted by the action was not required.                                | incorporators, or board of directors without shareholder action and shareholder  |
| ☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a           | shareholders. The number of votes cast for the amendment(s) approval.  |
|  | shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):               |
| "The number of votes cast for the amer   | idment(s) was/were sufficient for approval   |
| by Veroup  | hg group)  |
| (voi)  | ng group)  |
| Dated  | 1/2020   |
| Signature Velous &   | de,  |
| (By a director/press)  | dent or other officer – if directors or officers have not been rporator – if in the hands of a receiver, trustee, or other court |
| V  | eronika Meyers   |
| (  | Typed or printed name of person signing)   |
| 7  | resident   |
| <del>- (</del>   | Title of person signing)   |

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