P20 0000 48275

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Received 9/16/202/





000370292380

08/27/21--01008--023 **52.50



COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Happy Embroidery Drsigns Inc
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Robert Apel
Happy Embroidery Designs Zine. Firm Company 5734 Main Street
New Port Richar FL 34652 City Mate and Zip Code
Sqlest Tmh uniform, com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert Apel 11,727, 400-0080
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
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

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of .

FILED

(Name of Corporation as august	the filed with the Florida Dant of State and T
	tly filed with the Florida Dept. of State) PH 5: 56
1200004827	
(Document Number of	of Corporation (if known) 3E 3DE 15 10 10 F 3 IAI 2 TALL ALL SEEE, FL
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	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 corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	New Port Licher, Fl. 34652
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5734 Main Street New Port Licher, FL 34652
	Niew Port Licher, FL 34652
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida su	reet oddress)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
Signature of New R	Registered 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: <u>X</u> Change	<u>PT</u> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	BI	Heather Ituri	5422 Main Stratt
Add Remove			New Port Fiching FC 34652
2) Change	VP	Heather Itori	5422 Main Street
Add Remove Change	BTV	Robert Apel	Wew fort Richer, FL 34652 5734 Main Street
Add Remove Add Change Add			New Port Richay, FL 3465
Remove 5) Change			
Add			
Remove 6) Change			
Add			
Remove			

Aitach <i>addi</i>	or adding additionational sheets, if necess	rv). (Be spec	ific)	_ *		
		•	•			
<u>.</u>						
						•
	 .	-				·
						
						
	· · · · · · · · · · · · · · · · · · ·					
			•			
			<u> </u>			
						
·				-		
						-
<u>fan amend</u>	ment provides for an	exchange, rech	assification, or	cancellation of	issued shares,	
(if not a	for implementing the applicable, indicate N	amendment if	not contained	in the amendm	ent itseft:	
(1)	pproduce, madeine m	•,				
 -						
	· ·					
_	 _					
•						
<u> </u>						
						

Augst 24 2021
The date of each amendment(s) adoption:
Effective date if applicable: , 405051 24, 2021
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
(voting group)
Dated
Signature / West Officer - if directors or officers have not been
selected, by an incorporator - if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
Heather Itori
(Fyped or printed name of person signing)
Viesident
(Title of person signing)



September 9, 2021

ROBERT APEL HAPPY EMBROIDERY DESIGNS INC 5734 MAIN STREET NEW PORT RICHEY, FL 34652 US

Ref. Number: P2000048275

We have received your document for and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 321A00021665

Anissa Butler Regulatory Specialist II