## P20000058913

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: eston Pines Conard 2014@amail. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee ☐\$43.75 Filing Fee & ☐ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment** Articles of Incorporation of

FILED

SDL Wealth Inc	2022 FEB - 9 PM 3: 50
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P2000058913	SECRETARY OF STATE TALLAHASSEE, FL
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
It's No Limit, Inc.	The new
name must be distinguishable and contain the word "corporation," "("Inc.," or Co.," or the designation "Corp," "Inc," or "Co". 2 "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1403 Dunn Avenue
(Principal office address MUST BE A STREET ADDRESS)	Suite 2, #346
	Jacksonville FL 32218
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1403 Dunn Avenue Suite 2, #346
	Jacksonville, FL 32218
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	<u> </u>
Name of New Registered Agent Stack Leon	ord
1403 Bunn Ave	Ste 2,#346 reet address)
New Registered Office Address: Jack Sonvil	le, Florida 32218
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v	
Signature of New R	egistered Agent, if changing
Signature of them to	-0

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	<u>PT</u> <u>John</u>	1 Doc	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) Change	AMBR	Matthew Duncan	7113 Preston Pines Trail
Add			Jacksonville, FL 32244
Kemove		( , , )	
2) Change	<u>AMBR</u>	Sean Duncan	7113 Preston Pines Trai
Add			Jacksonville, FL 32244
Remove Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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:	
provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	<del>_</del>
(if not applicable, indicate N/A)	
N_A	
	<u> </u>

The date of each amendment(s) adoption: $\frac{2/9/2027}{}$	. if other than the
date this document was signed.  Effective date if applicable:  2 9 2 022  (no more than 90 days after	amondmant file date)
Note: If the date inserted in this block does not meet the applicable statuto 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 direction was not required.	ectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient	for approval
by	·"
Signature  (By a director, president or other officer – if direct selected, by an incorporator – if in the hands of a appointed fiduciary by that fiduciary)  Stacy Leonard  (Typed or printed name of person vicenies)	receiver, trustee, or other court
(Title of person signing)	