P20000062671

| (Requestor's Name) | |
|---|----------------|
| (Address) | 80035594 |
| (Address) | |
| (City/State/Zip/Phone #) | |
| (Business Entity Name) | 12/07/2001015- |
| (Document Number) | |
| Certified Copies Certificates of Status | |
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JAN 23 2021 IALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPOR | ATION: ANGEL DEPOT S | STORE INC | | |
|---------------------------|---|---|------------------|---|
| DOCUMENT NUMB | | | | |
| | of Amendment and fee are su | bmitted for filing. | | |
| Please return all corresp | ondence concerning this ma | tter to the following | ng: | |
| | | MONICA GON | NZALEZ | |
| - | | Name of Conta | ict Persoi | n |
| - | | Firm/ Con | npany | |
| | 67 | 97 WILLOW WO | OOD DR | #6043 |
| - | | Addres | SS | |
| | | BOCA RATON. | FL 3343 | 4 |
| - | | City/ State and | Zip Cod | e |
| | | angeldepotinfo@g | yahoo.co | m |
| - | E-mail address: (to be us | sed for future annu | al report | notification) |
| For further information | concerning this matter, pleas | se call: | | |
| MONICA GONZALE | Z | at (| 561 | 843-3957 de & Daytime Telephone Number |
| Name o | f Contact Person | (| Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the Flo | rida Dep | artment of State: |
| S35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Certified Cop (Additional co enclosed) | y | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Amer Divis | ing Address idment Section ion of Corporations Box 6327 | | Amenc Divisio | Address Iment Section on of Corporations entre of Tallahassee |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ANGEL DEPOT STORE INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P20000062671

(Document Number of Corporation (if known)

| A. If amending name, enter the new n | ame of the corporation: | The same | | |
|---|---|--|--|--|
| | Corp," "Inc," or "Co". / | The new company," or "incorporated" or the abbreviation "Corp.," I professional corporation name must contain the word | | |
| B. Enter new principal office address, | if applicable: | 6797 WILLOW WOOD DR #6043 | | |
| (Principal office address MUST BE A S | | BOCA RATON, FL 33434 | | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | | 6797 WILLOW WOOD DR #6043 | | |
| | | BOCA RATON, FL 33434 | | |
| | | | | |
| D. If amending the registered agent ar new registered agent and/or the new | w registered office address | | | |
| | | | | |
| new registered agent and/or the new | w registered office address MONICA GONZALEZ 6797 WILLOW WOOD D | E #6043 | | |
| new registered agent and/or the new Name of New Registered Agent | w registered office address MONICA GONZALEZ 6797 WILLOW WOOD D | R #6043 | | |
| new registered agent and/or the new | w registered office address MONICA GONZALEZ 6797 WILLOW WOOD D (Florida str | E #6043 | | |

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)

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 | <u>PT</u> | John Doe | |
|------------------------------|------------------|-----------------|---|
| X Remove | <u>V</u> | Mike Jones | |
| _X Add | \underline{sv} | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | VP | EDITH S ESCOBAR | 8099 NW 71ST CT |
| Add X Remove | | | TAMARAC. FL 33321 |
| 2) Change | S | EDITH S ESCOBAR | 8099 NW 71ST CT |
| Add | | | TAMARAC, FL 33321 |
| X Remove 3) Change | S | MONICA GONZALEZ | 6797 WILLOW WOOD DR #6043 BOCA RATON, FL 33434 |
| X Add Remove 4) Change Add | | | |
| Remove 5) Change Add | | | |
| Remove 6) Change Add Remove | | | |

| E. If amending or adding addition (Attach additional sheets, if necessity) | rssary). (Be specific | ·) | | |
|--|-----------------------|---|--|--------------|
| N/A | | | | |
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| If an amendment provides for provisions for implementing | the amendment if no | sincation, or canceus it contained in the ai | ation of issued snare: mendment itself: | <u>>.</u> |
| (if not applicable, indicate | · N/A) | | | |
| N/A | | | | |
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| The date of each amendment(s) adoption: | , if other than the |
|---|----------------------------------|
| date this document was signed. | |
| Effective date if applicable: | |
| (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, thi document's effective date on the Department of State's records. | s date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required. | action and shareholder |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendm by the shareholders was/were sufficient for approval. | ent(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust be separately provided for each voting group entitled to vote separately on the amendment(s): | tement |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by" | |
| (voting group) | |
| 12/3/2020 Dated | |
| Signature Science Jonnel | |
| (By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other | |
| appointed fiduciary by that fiduciary) | Jour |
| MONICA GONZALEZ | |
| (Typed or printed name of person signing) | |
| PRESIDENT | |

(Title of person signing)