## P20000063310

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Sanjant & Associa	tes Corporation		
	BER: P20000063310			
The enclosed Article:	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Janet Vidal			
		Name of Contact Pers	on	
	Sanjant & Associates Corpor	ation		
		Firm/ Company		
	13059 Island Bay Drive, Apt	101		
		Address	· · ·	
	Orlando FL 32828			
	-	City/ State and Zip Co	de	
	dreamerj71@gmail.com			
		sed for future annual repo	rt notification)	
For further information	on concerning this matter, pleas		304-1921	
Name	of Contact Person	Area C	ode & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida De	partment of State:	
S35 Filing Fee	■S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		<u>t_Address</u>	
	endment Section rision of Corporations	Amendment Section Division of Corporations		
	D. Box 6327		Centre of Tallahassee	
	lahassee, FL 32314		N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

of

(Name of Corporation as curr	ently filed with the Florida Dept.	of State)
P20000063310		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, tax Articles of Incorporation:	this Florida Profit Corporation add	opts the following amendment(s
A. If amending name, enter the new name of the corporation	<u>ı:</u>	
		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 professional corporation na	
B. Enter new principal office address, if applicable:	NIA	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		
	<del></del>	
	<del> </del>	<u></u>
C. Enter new mailing address, if applicable:	$\Lambda I / \Lambda$	ر در آب میرون در آب
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
		<u>~</u>
D. If amending the registered agent and/or registered office :	address in Florida, enter the nam	ne of the
new registered agent and/or the new registered office add		
Name of New Registered Agent		
	NA	<del></del>
(Florid	la street address)	
New Registered Office Address:	NA	Florida NA
	(Ciny)	(Zip Code)
ion Designation of America Company of the second America Designation of the second	<b>4</b> .	
New Registered Agent's Signature, if changing Registered Agenethereby accept the appointment as registered agent. I am famil		of the position.
	1Λ.	
	W Registered Agent, if changing	

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>	<u>John Do</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
I) X Change	P		Janet Vidal	N/A
Add				
Remove				
2) Change		_		<del></del>
Add				
Remove Change		_	,	
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	<del></del>	<del></del>		
Add				
Remove				

Attach additional	ding additional Article sheets, if necessary). (	(Be specific)			
	1	VIA			
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for amandment	nuovidos fou an avaha-			<b>:</b>	
provisions for in	provides for an exchan plementing the amend	ment if not conta	ined in the ameno	iment itself:	
(if not applic	ible, indicate N/A)				
	NA				
				<del></del>	
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. :

, .	10/10/2020		
The date of each amendment(s) add date this document was signed.	ption:		, if other than the
10/10/	2020		
Effective date <u>if applicable</u> :			
	(no more than 90 do	ays after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.		le statutory filing requirements, this date w	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopaction was not required.	led by the incorporators, or boar	rd of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff		umber of votes cast for the amendment(s)	
		th voting groups. The following statement e separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were s	sufficient for approval	
by			
selected, appointed	by an incorporator – if in the halfiduciary by that fiduciary) anet Vidal	- if directors or officers have not been ands of a receiver, trustee, or other court	
	(Typed or printed nam	ne of person signing)	
P	resident		

(Title of person signing)