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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Shabby S	Street Inc				
DOCUMENT NUMBER: P2000006361					
The enclosed Articles of Amendment and					
Please return all correspondence concerning	ng this matter to the following:				
Marcus Mouery					
	Name of Contact Person				
200 Lakaway Blass	Firm/ Company				
200 Lakeway Place					
Simpsonville, SC 29	Address P681				
-	City/ State and Zip Code				
mmoucry@gmail.co	om .				
E-mail address:	(to be used for future annual report notification)				
For further information concerning this mat	tter, please call:				
Marcus Mouery	at (³²¹) ³⁰²⁻⁹⁷⁹⁷				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount	nt made payable to the Florida Department of State:				
S35 Filing Fee					
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Shabby Street Inx				
(Name of Corporation a	as currently	filed with the Florida [Dept. of State)	
P20000063618				
(Document	t Number of C	Corporation (if known)	· · · · · · · · · · · · · · · · · · ·	1.7.41
Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation:	atutes, this <i>FI</i>	orida Profit Corporatio	n adopts the follow	ing amendment(s) to
A. If amending name, enter the new name of the corpo	oration:			
				The new
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviat	r "Co". Ai	mpany," or "incorporate professional corporation	ed" or the abbrevia n name must conto	4. nc n
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>ESS</u>)			·
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	office addres ce address:	s in Florida, enter the	name of the	
Name of New Registered Agent				
				_
	(Florida street	address)		
New Registered Office Address:			, Florida	
	(Ci	(n)	(Zip	Code)
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	ı familiar with		\$ 100 Per \$ 100	FIL ED
	e of New Regis	stered Agent, if changing		7: 04
`heck if applicable			· ·	£_

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	Stephen Pendegraft	219 Edgewood Ave S
Add			Jacksonville, FL 32254
x Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	,
	
an amendment provides for an exchan	nge, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	inge, reclassification, or cancellation of issued shares, Iment if not contained in the amendment itself:
(9 not approasse, marcule WA)	

The date of each amendment()	August 25, 2020	
date this document was signed.	of adoption:	, if other than the
Effective date if applicable:	August 25, 2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date wi Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and	d shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	10/20 Mario Mario —	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Marcus Mouery	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	