## P20000064893

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Amend

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Teacha's Sea Moss	, Corp	
DOCUMENT NUMI	P20000064893		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Gary Johnson		
		Name of Contact Person	1
	Gary Johnson's Accounting &	ETax Service, LLC	
	<del> </del>	Firm/ Company	
	1301 Riverplace Boulevard,	•	
		Address	
	Jacksonville, FL 32207		
		City/ State and Zip Cod	e
	g.johnson@garyjohnsonacco	unting.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Gary Johnson		at ( 850	459-6523
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio The Co 2415 Y	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Teacha's Sea Moss, Corp				
(Name of Corporation	n as currently fi	iled with the Florid	a Dept. of State)	<u>.</u>
P20000064893				
(Docume	ent Number of C	orporation (if known	)	
Pursuant to the provisions of section 607,1006, Florida 5 ts Articles of Incorporation:	Statutes, this <i>Flo</i>	orida Profit Corpora	tion adopts the follow	ving amendment(
A. If amending name, enter the new name of the cor	poration:			
				274
name must be distinguishable and contain the word "corpinal to a contain the word "corpinal the word "corpinal the word "corpinal the contain the word "chartered," "professional association," or the abbrevi	or "Co". A pa	ipany," or "incorpor rofessional corpora	ated" or the abbrevion name must con	Thenew_ation "Corp.," tain_the_word
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDR	RESS )			
		<del></del>		
				··— —
Enter new mailing address, if applicable:	•			ે
(Mailing address <u>MAY BE A POST OFFICE BOX</u>			, , .	—; <u>,</u> .–
	-			· ·}
	-			
. If amending the registered agent and/or registered		in Florida, enter th	e name of the	,
new registered agent and/or the new registered of	fice address:			مینید سد
Name of New Registered Agent				:
_	(Florida street d	address)		
New Registered Office Address:		· · · ·	, Florida	
	(Cit	v)	(Z)	p Code)
ew Registered Agent's Signature, if changing Regist	tered Agent:			
hereby accept the appointment as registered agent. I d	am familiar with	and accept the oblig	cations of the position	<b>1</b> .
Signatu	ire of New Regis	tered Agent, if chang	ing	

Check if applicable

<sup>■</sup> 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.

1-1	John Doe	
<u>v</u>	Mike Jones	
<u>sv</u>	Sally Smith	
Title	<u>Name</u>	<u>Addres</u> s
VP	Shorne Brown	119 Cherry Street
		Sharon Hill, PA 19079
	· <del>_</del> · · · · · · · · · · · · · · · · · · ·	
	V SV Title	V Mike Jones   SV Sally Smith   Title Name

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	onal sheets, i	f necessary).	cles, enter chang (Be specific)				
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an amendm	ent provides	<u>s for an excha</u>	nge, reclassifica	tion, or cancella	tion of issued	shares,	
<u>provisions fo</u>	<u>r implement</u>	<u>ting the ameno</u>	<u>dment if not con</u>	tained in the an	<u>iendment itsel</u>	<u>f:</u>	
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DocuSign Envelope ID: 726CF93C-6B9D-4D72-87CF-4A848C265433 December 1, 2020 The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed. December 1, 2020 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, 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 east 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 (voting group) December 2, 2020

Signature Kevin Ebanks

Dated

(By a director, president or other 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)

Kevin Ebanks

(Typed or printed name of person signing)

President

(Title of person signing)