

5/9/23, 2:05 PM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000173161 3)))



H2300017316134BCV

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

## To:

Division of Corporations  
Fax Number : (850)617-6380

## From:

Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516)935-3940  
Fax Number : (516)935-3088

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: SAMBAJETS@ICLOUD.COM

FILED  
2023 MAY -9 AM 8:42  
CLERK OF STATE  
TALLAHASSEE, FL

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
SAMBAJETS INC.**

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$43.75

2023 MAY -9 PM 2:30

Electronic Filing Menu

Corporate Filing Menu

Help

H23000173161

Articles of Amendment  
to  
Articles of Incorporation  
of

SAMBAJETS INC.

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

P20000065112

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

9 S. OCEAN BREEZE

LAKE WORTH, FL 33460

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

9 S. OCEAN BREEZE

LAKE WORTH, FL 33460

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

9 S. OCEAN BREEZE

(Florida street address)

New Registered Office Address:

LAKE WORTH

Florida

33460

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

Check if applicable

☒ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

H23000173161

H23000173161

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                      PT      John Doe  
  
X Remove                      V      Mike Jones  
  
X Add                              SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change	<u>PD</u>	<u>DAVID ZUCKERMAN</u>	<u>9 S. OCEAN BREEZE</u>
<u>      </u> Add			<u>LAKE WORTH, FL 33460</u>
<u>      </u> Remove			
2) <u>      </u> Change			
<u>      </u> Add			
<u>      </u> Remove			
3) <u>      </u> Change			
<u>      </u> Add			
<u>      </u> Remove			
4) <u>      </u> Change			
<u>      </u> Add			
<u>      </u> Remove			
5) <u>      </u> Change			
<u>      </u> Add			
<u>      </u> Remove			
6) <u>      </u> Change			
<u>      </u> Add			
<u>      </u> Remove			

FILED

2023 MAY -9 AM 8:42  
CLERK OF DISTRICT COURT  
JULIA ASSESS, FL

H23000173161

H23000173161

**E. If amending or adding additional Articles, enter change(s) here:**  
(Attach additional sheets, if necessary). (Be specific)

2023 MAY -9 AM 8:42  
SCHOOL OF STATE  
TALLAHASSEE, FL

סמך

F. 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:  
(if not applicable, indicate N/A)

H23000173161

H23000173161

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, 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 cast 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

by \_\_\_\_\_  
(voting group)"

Dated MAY 9, 2023 \_\_\_\_\_

Signature \_\_\_\_\_

(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)

DAVID ZUCKERMAN

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)

FILED  
2023 MAY -9 AM 8:42  
STATE OF FLORIDA  
TALLAHASSEE, FL

H23000173161