## P20000072153

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2021 FEB -5 AM A: 51
SECRETARY OF STATE
TALLAHASSEF STATE

.

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: TIKA GROUP CO	ORP				
DOCUMENT NUMI	P2AAAAA72183					
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corre	spondence concerning this ma	atter to the following:				
		Name of Contact Person	1			
	TIKA GROUP CORP					
		Firm/ Company				
	200 LESLIE DR APT 230					
		Address				
	HALLANDALE BEACH, FI	1. 33009				
		City/ State and Zip Cod	e			
	tikaherbshelp@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatio	n concerning this matter, plea	se call:				
CATALINA FONNE	GRA	at t	1			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State;			
■ \$35 Filing Fee	□\$43.75 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment

## Articles of Incorporation L.ED

TIKA GROUP CORP	2021 FEB -5 AM 8: 55
( <u>Name of Corporation a</u> P20000072183	SEURE JARY OF STATE TALLAHASSEE FI
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida States Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
COLONICS4YOU CORP	
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered." "professional association," or the abbreviat	ration," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	200 LESLIE DRIVE APT 230
(Principal office address <u>MUST BE A STREET ADDRE</u>	(SS) HALLANDALE BEACH, FL 33009
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	200 LESLIE DRIVE APT 230
	HALLANDALE BEACH, FL 33009
D. If amending the registered agent and/or registered new registered agent and/or the new registered office	office address in Florida, enter the name of the
Name of New Registered Agent	<del></del>
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent: a familiar with and accept the obligations of the position
	Jamilia Win und accept the owngenens of the position.
Signature	of New Revistered Agent it 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)

Evample:

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	10/1
$\underline{X}$ Remove	$\underline{V}$	Mike Jones	/ †
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		· · <del>_</del>	
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach <i>additional sheets, if necessary).</i> (Be specific)	
N/A	
	<del>-</del>
	<del></del>
	<del></del> -
<u> </u>	<del></del>
	<del></del>
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)	
N/A	
	7

. . . .

The date of each amendmen date this document was signed	t(s) adoption:	, if other than the
Effective date if applicable:	Febreuary 2, 2021	
enective date <u>ir appreasie</u> .	tno more than 90 days after amendment file date	)
	this block does not meet the applicable statutory filing requirementhe Department of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareh	older action and shareholder
	re adopted by the shareholders. The number of votes east for the an ere sufficient for approval.	pendment(s)
	re approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	euary 2, 2021	
Dated	4	
Signature _	CATORILLANDO	
Signature(E	by a director, president or other officer – if directors or officers have	not been
SO	elected, by an incorporator - if in the hands of a receiver, trustee, or	
ઘ	ppointed fiduciary by that fiduciary)	
	CATALINA FONNEGRA	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	