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.

(((H23000060291 3)))



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To:

Division of Corporations

Fax Number : (950)617-6380

From:

Account Name : TAX CONTROLLER INC

Account Number : I20210000142

: (954)301-1848

Fax Number

: (954)532-9458

Enter the email address for this business entity to be used for future $oldsymbol{arphi}$ annual report mailings. Enter only one email address please. *

Email	Address:
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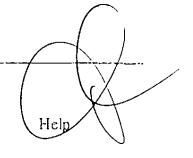
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COR AMND/RESTATE/CORRECT OR O/D RESIGN ZEAL APPAREL INC

Certificate of Status	0
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(((H23000060291 3)))

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ZEAL APPAREL	INC		
DOCUMENT NUN	D20000075100			
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	LUCIANA GOMES			
	<u></u>	Name of Contact Perso	n	-
	ZEAL APPAREL INC			
		Firm/ Company		
	4938 ALFRESCO ST			5.7. 5 .7.
		Address		- 52. C
	BOCA RATON, FL 33428			WILL SARVERY OF AUTOMOTOR OF AUTOMOTOR TO AUTOMOTOR OF AUTOMOTOR OT AUTOMOTOR OF AU
		City/ State and Zip Cod	e	-SEE. E
	ZEALSORS@GMAIL.COM	l		
	-	sed for future annual report	notification)	
For further information LUCIANA GOMES	on concerning this matter, pleas		. 285-3869	
Name of Contact Person		at (at (285-3869 dc & Daytime Telephone Numbe	
	or the following amount made			,
S35 Filing Fee	S43.75 Filing Fcc & 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassec 2415 N. Monroe Street, Suite \$10		

Articles of Amendment to Articles of Incorporation of

ZEAL APPAREL INC				
(Name of Corporati	on as currently filed with the l	Florida Dept. of State)	•••	
P20000075190				
(Docum	nent Number of Corporation (if	known)	-	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Co	prporation adopts the following	g amendme	nt(s)
A. If amending name, enter the new name of the co	rporation:			
ZEAL SORS INC		 -;	The Snew	,
name must be distinguishable and contain the word "co" "Inc.," or Co.," or the designation "Corp," "Inc.," "chartered," "professional association," or the abbre B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	" or "Co". A professional coviation "P.A."		n the ord	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)	_ ()	9:24	**************************************
D. If amending the registered agent and/or register new registered agent and/or the new registered of		nter the name of the		
Name of New Registered Agent	- · · · · · · · · · · · · · · · · · · ·	 	-	
	(2)			
	(Florida street address)			
New Registered Office Address:	(City)	, Florida(Zip C	ode)	
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent.	istered Agent:		, out,	
Signa	ture of New Registered Agent, ij	f changing		
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 6	07.0120 (11) (e), F.S.			

TAX CONTROLLER INC (((423000060291 3)))

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	LUCIANA GOMES	4938 ALFRESCO ST
Add			BOCA RATON, FL 33428
Remove			Please change her title for President
2) Change	P	FERNANDA OLIVEIRA	4938 ALFRESCO ST
Add			BOCA RATON, FL 33428
X Remove 3) Change			
Add			
Remove			<u></u>
4) Change		_	
Add			
Remove			24 47
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Be specific)		
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ndment it not contained in the amendment itself	<u>:</u>	
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	ange, reclassification, or cancellation of issued s	2023 FEB 16

The date of each amendment(s)	Adoption:				_, if other than the
date this document was signed.					
Effective date if applicable:	(по то	re than 90 days of	er amendment file date)		
Note: If the date inserted in this document's effective date on the I	block does not meet t	the applicable stat	-		not be listed as the
Adoption of Amendment(s)	(CHECK O	NE)			
☐ The amendment(s) was/were a action was not required.	dopted by the incorpora	ators, or board of c	lirectors without shareho	older action and s	harcholder
☐ The amendment(s) was/were as by the shareholders was/were			of votes cast for the amo	endment(s)	
(By a select	(voting group en (voting group) 4/2023 OUCONOL GO director, president or or) was/were sufficiently) ther officer - if dir if in the hands o	rately on the amendmen	(S): TALL AHASSEE, FL not been	2023 FEB 16 AM 9: 24
	LUCIANA GOMES				
	(Typed or	printed name of p	erson signing)		
	DIRECTOR				
	(Title of p	erson signing)			