P20000075216

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	#)
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(Do	ocument Number)	
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C. BRUMBLEY OCT 20 2022

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: HAPPY	Horse Hay	y life I	C_	
DOCUMENT NUMB	<i>'</i>	000 752/6			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
-	JAUCE	Name of Contact Person	1	20?? • 27 ! 7	 [3] 12: 57
-	5941	Firm/ Company E Dell L Address VENUCSS 17 City/ State and Zip Code	34452	:	સુખર્ <u>ર</u> ોડ
For further information	E-mail address: (to be us	sed for future annual report	notification)		
	c Joves f Contact Person the following amount made			one Number	
S35 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 Stat Certified Copy (Additional Copy is enclosed)	us	
Ame Divis	ing Address Indment Section Identifications Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

Articles of Incorporation of

(Name of Corporation as currently	Tiled with the Florida Dept. of State)
P00000075216	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp" professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	14691 NW 160 Proe- WILLISTON FI 32696
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	C/O TACKE TONES 5941 13 DE11 CN FRIVENNESS F1 34452
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	2022 OU
(Florida stre	et address)
New Registered Office Address:	Florida SC 7 F
New Negister ed Cyffee Address.	Ciny) Tri (Zip Gale) Tri (Sip Gale)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if 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)

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change	,,,		
Add			
Remove			
6) Change			
Add			
Remove			

	rcessary). – (Be spec	ijic)			
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an amendment provides fo	or an exchange, recl	lassification, or ca	incellation of issu	ued shares,	
rovisions for implementing	g the amendment if	not contained in	the amendment	itself:	
(if not applicable, indica	ite N/A)				
					
			 -		
······					
					•·

The date of each amendmen	nt(s) adoption: 4/w/2v	, if other than the
date this document was signe	d.	
Effective date if applicable:	4/22/22	
<u></u>	d. 4/22/22 (no more than 90 days after amendment file d	late)
	this block does not meet the applicable statutory filing requirenthe Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wo action was not required.	ere adopted by the incorporators, or board of directors without sha	reholder action and shareholder
	ere adopted by the shareholders. The number of votes cast for the were sufficient for approval.	amendment(s)
	ere approved by the shareholders through voting groups. The followed for each voting group entitled to vote separately on the amend.	
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
bv		
,	(voting group)	
:	By a director, president of other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary) Pal Aw Plackhant (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Co-/nainut	
	(Title of person signing)	