## P20 000075264

(Re	equestor's Name)	
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(Cir	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	84 House o	of Fly Inc		
DOCUMENT NUMBER:	P2000007291	2		
The enclosed Articles of Amenda	nent and fee are su	bmitted for tiling		
Please return all correspondence	concerning this ma	tter to the follow	ing:	
Nak	ia Lambright			
		Name of Cont	act Person	
		Firm/ Cor	npany	
2345 /	Ali Baba Ave			
Opa Lo	ocka, FL 3305	Addro	ess	
		City/ State and	d Zip Code	
nkl	ambright@yał	noo.com		
E-mai	l address: (to be us	sed for future ann	ual report n	otification)
for further information concerning	g this matter, pleas	se call:		
Lahteefah Parramo	ore	at (	727	457-2625
Name of Contact I		Area Code	457-2625 & Daytime Telephone Number	
inclosed is a check for the follow	ring amount made p	payable to the Flo	orida Depan	ment of State:
	.75 Filing Fee & ificate of Status	S43.75 Filin Certified Cop (Additional copenclosed)	oy	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations		Division The Cen 2415 N.	ent Section of Corporations are of Tallahassee Monroe Street, Suite 810 see, FL 32303

## Articles of Amendment to Articles of Incorporation of

84 House of Fly inc

( <u>Name of</u>	Corporation as currer	tly filed with the Florida	Dept. of State)	
P20000072912				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.16 its Articles of Incorporation:	006, Florida Statutes, thi	s Florida Profit Corporati	ion adopts the foll	owing amendment(s) to
A. If amending name, enter the new name	ne of the corporation:			
MOB Entertainment Inc.				***
name must be distinguishable and contain to "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	rp," "Inc," or "Co".	A professional corporati	ited" or the abbre ion name must co	The new viation "Corp.," ontain the word
B. Enter new principal office address: if	applicables	N/A		
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )		N/A		
		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
		N/A		
		N/A		
D. If amending the registered agent and new registered agent and/or the new	or registered office address	dress in Florida, enter the	e name of the	do de la companya de
Name of New Registered Agent	N/A	<del></del>		3
	N/A			립 의
_	(Florida s	treet address)	· · · · · · · · · · · · · · · ·	ন
New Registered Office Address:			Florida	
		(City)	,	(Zip Code)
New Registered Agent's Signature, if cha	nging Registered Agen	<u>t:</u>		
hereby accept the appointment as register	va agent i am familiar	with and accept the oblige	ations of the positi	ion.
-	Signature of New ,	Registered Agent, if chang	ing	<del></del>

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: <u>X</u> 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) N/A Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or (Attach addition	r adding additional Ar nal sheets, if necessary).	ticles, enter change . (Be specific)	e(s) here:		
N/A	war wreens, if sie eenstags,	· · · · · · · · · · · · · · · · · · ·			
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If an amendme	ent provides for an exc	hange, reclassificat	tion, or cancellatio	on of issued shares,	
Uf not ann	implementing the amdicable, indicate N/A)	<u>endment if not con</u>	tained in the amer	idment itself:	
	neame, marcare (v.a.)				
N/A				_	
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The date of each amendment(s)	02 / 12 / 2021	
date this document was signed.	adoption.	, if other than the
Effective date <u>if applicable</u> :	02 / 12 / 2021	
	(no more than 90 days after amendment file d	(ate)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirent Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the sufficient for approval.	amendment(s)
☐ The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The followr each voting group entitled to vote separately on the amenda	owing statement ment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
Dated Signature (By a selec	director, president of the officer it directors or officers hat tell, by an incorporator – if in the hands of a receiver, trustee, inted fiduciary by that fiduciary)  (Typed or printed name of person signing)	ve not been or other court
	President	
	(Title of person cuming)	- <del></del>