## P200000 78715

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24 APR 30 PN 4: 36

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SIMPLY OY COM	MPANY	
DOCUMENT NUMB			
The enclosed Articles o	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	SCOLNICK, JUDE EMMA		
-	SIMPLY OY COMPANY	Name of Contact Person	1
-		Firm Company	
	1135 SATINLEAF ST	• •	
-		Address	
	HOLLYWOOD, FL 33019		
-		City State and Zip Cod	2
	JESCOLNICK@GMAIL.CO	ЭМ	
-	<del>-</del>	sed for future annual report	notification)
For further information	concerning this matter, pleas		778-8499
Name o	f Contact Person	Area Co	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amei Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section In of Corporations Entre of Tallahassee S. Monroe Street, Suite 810 Issee, F1, 32303

## Articles of Amendment to Articles of Incorporation of

SIMPLY OY COMPANY			
	f Corporation as curren	tly filed with the Florida Dep	t. of State)
P20000078715			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation a	dopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
SIMPLY KIDS COMPANY			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co",	A professional corporation i	or the abbreviation "Corp"
B. Enter new principal office address,	if applicable:	NO CHANGE	≨± <b>≥</b>
(Principal office address <u>MUST BE A STREET ADDRI</u>			APP APP
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST (</u>		NO CHANGE	CD PRINTER STATE
D. If amending the registered agent an new registered agent and/or the new			me of the
Name of New Registered Agent	NO CHANGE		
- me sy me magazine segment		44 P	<del></del>
		treet address)	
New Registered Office Address:			(2)
New Registered Office Address.		(City)	, Florida <u></u>
New Registered Agent's Signature, if el I hereby accept the appointment as registe			rs of the navition
2	and the state of the property of the state o	The state of the s	and the formation
	Signature of New	Registered Agent, if changing	

Check if applicable

 $\blacksquare$  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 I	<u>)0e</u>	
X Remove	<u>V</u> <u>Mike</u> .	Jones	
X Add	<u>SV Sally 3</u>	Smith	
Type of Action (Check One)	Title	<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	<del></del>		
Add		<del></del>	
Remove			

O CHANGE	, if necessary),	(Be specific)				
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<u></u>						
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				<del>_</del>		
<del></del>					······································	
<u>If an amendment provi</u>	<u>des for an exch</u>	<u>ange, reclassif</u>	<u>ication, or can</u>	cellation of iss	ued shares,	
provisions for impleme	enting the amer	<u>ndment if not </u>	<u>contained in th</u>	<u>ie amendment</u>	<u>itself:</u>	
(if not applicable, i	naicaie N'A)					
) CHANGE						
	<del></del> -		<del></del>			
				-		
		<del></del>				
		<del></del>				

•

The date of each amendment(s) ad	12/29/2023 Jontion: jt	other than the
date this document was signed.		orner tritar tric
12/29 Effective date <u>if applicable</u> :	9/2023	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not b partment of State's records.	e listed as the
Adoption of Amendment(s)	( <u>CHECK ONE)</u>	
The amendment(s) was were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and sharel	holder
The amendment(s) was were ado by the shareholders was were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
The amendment(s) was were approximately provided for a	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast t	or the amendment(s) was were sufficient for approval	
the incorporators		
	(voting group)	
12/29/2023		
Dated		
Simators		
selected	rector, president or other officer—if directors or officers have not been , by an incorporator—if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	JUDE EMMA SCOLNICK	
-	(Typed or printed name of person signing)	
,	CEO	
-	(Title of person signing)	<del></del>