## P20000084056

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600368247656

05.715.721--010:5--005 \*\*95.00

2021 JUN 18 PM 5: 36

Mulnd

JUL 1 6 2021 LALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: STUDIOAS	SHLIZ CORPORATION
DOCUMENT NUMBER: P20000084056	5
The enclosed Articles of Amendment and fee ar	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
LOVETTE DOBSO	N
	Name of Contact Person
INCFILE.COM LLC	0
	Firm/ Company
17350 STATE HW	Y 249 STE 220
<del></del>	Address
HOUSTON, TX 77	064
	City/ State and Zip Code
EFILE1234@INCFILE.C	СОМ
E-mail address: (to b	be used for future annual report notification)
For further information concerning this matter, p	olease call:
LOVETTE DOBSON	at (88888 ) · 462-3453
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	nde payable to the Florida Department of State:
S35 Filing Fee Certificate of Statu	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

## STUDIOASHLIZ CORPORATION

	<del></del>
tly filed with the Florida Dept. of State)	9
084056	
of Corporation (if known)	0
s Florida Profit Corporation adopts the follow	wing amendn
"Co". A professional corporation name mu	The ne c abbreviations cast contain the
1801 N Hiatus Rd	
Pembroke Pines, FL 33026	
1801 N Hiatus Rd	
Pembroke Pines, FL 33026	
dress in Florida, enter the name of the ss:	
street address)	
, Florida	
(City) (2	Zip Code)
nt: r with and accept the obligations of the positio	on.
	Pembroke Pines, FL 33026  1801 N Hiatus Rd  Pembroke Pines, FL 33026  dress in Florida, enter the name of the ss:  street address) , Florida

Signature of New Registered Agent, if changing

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) X Change	Р		Ashley Lizano	1801 N Hiatus Rd
Add	<del></del>	_		Pembroke Pines, FL 33026
Remove				
2) Change		_		
Add				
Remove				
-3 ) Change		<del></del>		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		<u> </u>		
Add				
Kemove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
6 1 4 11 6	and a second charge
<u>f an amendment provides for an excr</u>	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	
<u>provisions for implementing the ame</u> (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	s date will not be listed as
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by	
■ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehaction was not required.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	r
June 11, 2021	
Ashley Lizano	
(By a director, president or other officer – if directors or officers have not b selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Ashley Lisano	
(Typed or printed name of person signing)	
rresident.	
(Title of person signing)	

the

the