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(Re	questor's Name)	·
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: EVER 195	ling Essence INC.
DOCUMENT NUMBER: <u>P2D0DD0</u>	3
The enclosed Articles of Amendment and fee are s	
Please return all correspondence concerning this m	natter to the following:
Christ	Name of Contact Person
	Firm/ Company
	Gove Ave Todas
Talkh	City/ State and Zip Code
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ease call:
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
\$35 Filing Fee \$\text{Certificate of Status}\$	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐\$52.50 Filing Fee 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 Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

of

to

	2973 1999	20 64 0 65
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	E2 TH 3: U/
	The Fire	95.7A.m.
(Document Number of Corporation (if kn	nown)	
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corp</i> s Articles of Incorporation:	paration adopts the fo	ollowing amendment
. If amending name, enter the new name of the corporation:		
		Thenew
ame must be distinguishable and contain the word "corporation," "company," or "inco Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corp chartered," "professional association," or the abbreviation "P.A."	orporated" or the abb poration name must	reviation "Corp.," contain the word
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
-		
 If amending the registered agent and/or registered office address in Florida, en new registered agent and/or the new registered office address: 	ter the name of the	
Name of New Registered Agent		
(Florida street address)	-	_
New Registered Office Address:	Florida_	
(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the	e obligations of the pe	sition.
Signature of New Registered Agent, if	Chanaina	
Mgnature oj New Registerea Agent, ij	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 I)oe	
X Remove	<u>V</u> <u>Mike</u>	Jones .	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	C <u>EO</u>	ChristinaWilliams	1005 Goie Ave
Add			Tallahassee F1, 32310
Remove 2) Change	<u>vp</u>	Christian Williams	405 (nore Ave
Add Remove Change	Treasure	Christina Williams	Tallahassee F1,32310 1005 (70 ce Ave Tallahassee F1,32310
Add			
Remove 4) Change	Secretary	Christina Williams	615 Gore Ave
Add			Tallahassee F1, 32310
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)		
			
an amendment provides for an excl	ange, reclassification, or cancel	lation of issued shares,	
provisions for implementing the ame	ange, reclassification, or cancel	lation of issued shares, imendment itself:	
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancel adment if not contained in the a	lation of issued shares, imendment itself:	
provisions for implementing the ame	ange, reclassification, or cancel adment if not contained in the a	lation of issued shares, imendment itself:	
provisions for implementing the ame	ange, reclassification, or cancel ndment if not contained in the a	lation of issued shares, amendment itself:	
provisions for implementing the ame	ange, reclassification, or cancel adment if not contained in the a	lation of issued shares, imendment itself:	
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provisions for implementing the ame	ange, reclassification, or cancel ndment if not contained in the a	lation of issued shares, imendment itself:	
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancel ndment if not contained in the a	lation of issued shares, imendment itself:	

The date of eadate this document	nent was signed. June 27th 2023, if other than the
Effective date	if applicable: (no more than 90 days after amendment file date)
Note: If the document's ef	date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the fective date on the Department of State's records.
Adoption of A	Amendment(s) (CHECK ONE)
	ment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder not required.
☐ The amend	ment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) reholders was/were sufficient for approval.
☐ The amend	ment(s) was/were approved by the shareholders through voting groups. The following statement
must he se	parately provided for each voting group entitled to vote separately on the amendment(s):
	number of votes cast for the amendment(s) was/were sufficient for approval
	number of votes cast for the amendment(s) was/were sufficient for approval
"The	parately 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
"The	number of votes cast for the amendment(s) was/were sufficient for approval (voting group) Dated \(\begin{align*} \leq 29 \ \ 23 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
"The	number of votes cast for the amendment(s) was/were sufficient for approval (voting group) Dated
"The	number of votes cast for the amendment(s) was/were sufficient for approval (voting group) Dated
"The	number of votes cast for the amendment(s) was/were sufficient for approval (voting group) Dated
"The	number of votes cast for the amendment(s) was/were sufficient for approval (voting group) Dated U29 23 Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
"The	number of votes cast for the amendment(s) was/were sufficient for approval (voting group) Dated
"The	number of votes cast for the amendment(s) was/were sufficient for approval (voting group) Dated U29 23 Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)