P20000084536

(Re	questor's Name)	<u> </u>
(Ad	idr es s)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	FL2DAY, INC.		
	P20000084536 BER:		
	of Amendment and fee are su		- • ·
		_	
Please return all corre	spondence concerning this ma	itter to the following:	
	T. Savineau		
		Name of Contact Person	n
	MCR Partners, Inc.		
	20533 Biscayne Blvd (#1301	Firm/ Company)	
	Miami, FL 33180	Address	
		City/ State and Zip Code	<u> </u>
	mcrpartners@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call:	
Γ. Savineau		786 at (607-2005
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations		Amend Divisio	Address Iment Section on of Corporations
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FL2DAY, INC.	
P20000084536	ly filed with the Florida Dept. of State)
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida 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," 'Inc.," or Co.," or the designation "Corp." "Inc." or "Co". "chartered," "professional association," or the abbreviation "P.A.	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	20533 BISCAYNE BLVD (#1301)
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33180
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	20533 BISCAYNE BLVD (#1301): 2
(Maning address MAY BE A 1031 OFFICE BOA)	MIAMI, FL 33180
	Of an included the second seco
D. If amending the registered agent and/or registered office add	Iress in Florida, enter the name of the:
new registered agent and/or the new registered office addres	
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New 1	Registered 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
	S	FABRICE BOSCO	20533 BISCAYNE BLVD (#1301)
1) Change			MIAMI, FL 33180
Add			
Remove 2) Change	S	QUENTIN VIAC	1604 WASHINGTON AVENUE
Add	_		MIAMI BEACH, FL 33139
X Remove	_		
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			
Add			
Pomovo			

Attach additional sheets, if neces	sary). (Be specific)	nge(s) here:		
				
				
				
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·	3 4			
an amendment provides for a provisions for implementing the	<u>n exchange, reclassif</u> ie amendment if not <i>c</i>	cation, or cancellation	on of issued shares,	
(if not applicable, indicate N	VA)	The state of the s	idiicii (ideii)	
	_			
		-		
			 -	

The date of each amendment(s) date this document was signed.	adoption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/were are by the shareholders was/were:	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were apmust be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
August 23	. 2021
Dated	
G *	EQ.
Signature(By a	director, president or other officer – if directors or officers have not been
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other court
appoi	nted fiduciary by that fiduciary)
	FABRICE BOSCO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)