## P20000087927

(Red	questor's Name	*)
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PICK-UP	☐ WAIT	MAIL
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FILED 2022 JUN 24 PM 2: 23



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	rion: EAG	LE OF GOD	) YC INC.	
DOCUMENT NUMBER	4: <u>P2000008</u>	LE OF GOD 7927.		
	Amendment and fee are su			
Please return all correspo	ndence concerning this ma	tter to the following:		
_	<u>Ya</u>	Name of Contact Person	10	
Firm/ Company 4811 NOTTINGHAM DR Address				
_		Address  ERS FC 33  City/ State and Zip Code		
For further information of		sed for future annual report		
Yamile	Castillo. Contact Person		3409739 de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 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)	
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

to
Articles of Incorporation

οf

Eagle of god	YC INC filed with the Florida Dept. of State)
(Name of Corporation as currently	filed with the Florida Dept. of State)
P200000 87	1977
(Document Number of	
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
$\alpha$ but is $\alpha$ .	77
name must be distinguishable and contain the word "corporation," "co" "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	The new pmpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable:	4810 NOTTINGHAM DR
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Fort Hyens, FL 53905
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4811 Nottingtham DR Font Hyens, Fl 33905.
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent N/A	
N/A (Florida stree	et address)
New Registered Office Address: N/A  New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	Florida  City)  IZip Code  No. 1. 24  ith and accept the obligations of the position.
Signature of New Reg	gistered 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)

Example:

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.

X Change	PT John D	<u>oe</u>			
X Remove	V Mike Jo	<u>ones</u>			
X Add	SV Sally S	mith			
Type of Action (Check One)	Title	Name	<u>Addres</u> s		
1) Change					
Add				<del></del> .	
Remove					
2) Change					
Add				<del></del>	
Remove 3) Change				2022 J	-1.J
Add				JUN 24	
Remove			<del></del>		
4) Change	-			PH 2: 23	
Add				23	
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
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	Tá:	25	-
		2022	-
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	N.S.S.	124	<del></del>
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		2	$\overline{C}$
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	<b>S</b> :	2: 23	
provisions for implementing the amendment if not contained in the amendment itself:	SEE, FLORIDA	23	
(if not applicable, indicate N/A)			
			-
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	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirement of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adoptaction was not required.	ed by the incorporators, or board of directors without share	reholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the cient for approval.	amendment(s)
	ved by the shareholders through voting groups. The follouch voting group entitled to vote separately on the amenda	
"The number of votes cast for	r the amendment(s) was/were sufficient for approval	₹ 2
by		FIL 2022 JUN 24 FALL AHASS
	(voting group)	JUN 21
		AS: 22
Dated / 0 -	05-2022 110k	SEC D
Danci		PH 2:
Signature		<u> </u>
(By a dire	ctor, president or other officer Circlinetors or officers ha	ve not been
	by an incorporator – if in the hands of a receiver, trustee,	or other court
appointe	fiduciary by that fiduciary)	
	Yamilet Castillo	
_	(Typed or printed name of person signing)	<del></del>
_	President.	
	(Title of person signing)	