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y 8/21/2024

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Allasea Holdings, I	inc.	
DOCUMENT NUM	P20000091888		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corru	espondence concerning this ma	tter to the following:	
	Peter Weitz		
		Name of Contact Persor	1
	Allasea Holdings, Inc		
		Firm/ Company	
	4208 Ne 21st Avenue		
		Address	
	Fort Lauderdale, FL 33308		
		City/ State and Zip Code	2
	peter.weitz@icloud.com		
	_	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
peter weitz		at (843-4678
Name of Contact Person		Area Code & Daytime Telephone Number	
Enclosed is a check f	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)
An Div	iling Address tendment Section vision of Corporations D. Box 6327	Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Allasea Holdings, Inc.

2022 JULI - 7 Ail 9: 27

			<u>/ Bii 9: 27</u>
(Name of Corporation :	as currently filed with the F	lorida Dept. of State)	
P20000091888		•	20 L
(Document	t Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607,1006, Florida State Articles of Incorporation:	atutes, this Florida Profit Cor	rporation adopts the following	; amendment(s) t
A. If amending name, enter the new name of the corp	oration:		
			The new
name must he distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp." "Inc.," of "chartered." "professional association," or the abbrevia	r "Co". A professional cor		
B. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)		
	·		
. Enter new mailing address, if applicable:			
(Muiling address MAY BE A POST OFFICE BOX)			<u>.</u>
	-		
	 		
D. If amending the registered agent and/or registered	office address in Florida, en	iter the name of the	
new registered agent and/or the new registered offi		ter the name of the	
Name of Name Production 1.4 and			
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip C	ode)
Sew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. Lan	e <mark>red Agent:</mark> m familiar with and accent the	abligations of the position	
nervoji decept ine appoiniment as registered agent. Ta	m juminus simi usu ueeepi me	ornganous of the position.	
Signatur	re of New Registered Agent, if	changing	
·	- "		
Check if applicable			

 \Box 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.

X Change	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	v Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1)Change	D	Eric Warlick	4605 SW Poplar Lanc
Add			Portland OR 97225
X Remove 2) Change	D	Michelle Blouin	4208 NE 21st Avenue
XAdd			Fort Lauderdale, FL 33308
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

	litional sheets, if n	necessary).	(Be specific)				
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	idment provides s for implementi	for an exchai	nge, reclassific Iment if not co	<u>ration, or cance</u> intained in the	<u>llation of issued s</u> amendment itself	<u>hares,</u> ·	
It an amen provision	t applicable, indic	ate N/A)				_	
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• •	May 31, 2022	
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	block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amenosufficient for approval.	dment(s)
	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment(s	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
5/31/202. Dated Signature	Whilet	
selec	director, president of other officer – if directors or officers have not led, by an incorporator – if in the hands of a receiver, trustee, or oth inted fiduciary by that fiduciary)	
	Peter Weitz	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	