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COVER LETTER

TO: Amendment Section Division of Corporations Jockey Elite Inc P 2 00000 97084 NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Gail Clift
Name of Contact Person Infeld Barr Resokind CPA's LLC
Firm/ Company 5011 South SR7 Suite 107 Davie, FL 33314

City/State and Zin Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sail Clift

at (954) 6 (6-1389)

Name of Contact Person

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee pard Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

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

is enclosed)

Articles of Amendment to Articles of Incorporation of

. . .

to

Jockey Elite Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State	<u>.</u>
P 2 00000 97084	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the its Articles of Incorporation:	following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the about the contain the word "corporation," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A."	The new breviation "Corp.," t contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
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 obligations of the pe	osition.
Signature of New 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 Do	<u>c</u>	
X Remove	<u>v</u>	Mike Jos	nes	
_X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	<u>P</u>	_	Barry Wasserstrom	450 Golden Isles Dr
Add Remove			,	Apt 36 Hallandale, FL 33009
2) Change		_		
Add				
Remove Change	<u></u>		Ruben Munoz-Mendez	450 Golden Isks D Apr 36
		- 1		Hallandale, FL 3300
Remove 4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

F. 11	amending or adding additional Articles, enter change(s) here:
(A)	ttach additional sheets, if necessary). (Be specific)
	•
12 14	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
r. <u>11</u> D	royisions for implementing the amendment if not contained in the amendment itself;
_	(i) not applicable, indicate N/A)

	•
	· . ·
· :	The date of each amendment(s) adoption: $3/2 = 2/2$, if other than the 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, this date will not be listed as the document's effective date on the Department of State's records.
	Adoption of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
	☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
	☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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
	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 equit appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)

Ϊ

Board Resolution of Jockey Elite Inc.

Dated: March 22, 2021

A meeting of the board of directors was held, on above date, Ruben Munoz-Mendez was elected president.

An amendment is being made through the articles of incorporation, and will be filed with the State of Florida.

Director and President



May 13, 2021

GAIL CLIFT INFELD BARR REISKIND CPA'S LLC 5011 SOUTH SR 7 SUITE 107 DAVIE, FL 33314 US

SUBJECT: JOCKEY ELITE INC. Ref. Number: P20000097084

We have received your document for JOCKEY ELITE INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

YOU DO :NOT HAVE ALL THE PAGES TO YOUR PROFIT CORPORATION FORM. PLEASE COMPLETE THE PROFIT CORPORATION FORM ATTACHED TO THIS LETTER.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

2021 JUN - 7 PM 3

Letter Number: 421A00010022

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