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Office Use Only



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2021 JUN 16 AM 10: 20 SECRETARY OF STATE

Suma

JUN 3 2021

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORA | ATION:AAll den | no Inc | | | |
|------------------------------|---|--|--|----------------|-----------|
| DOCUMENT NUMBE | CR: | P21000008736 | | _ | |
| The enclosed Articles of | Amendment and fee are su | abmitted for filing. | | | |
| Please return all correspond | ondence concerning this ma | itter to the following: | | | |
| | | Sonia Becerr | a | | |
| _ | | Name of Contact Perso | n | | |
| | | Swyft Filings | ì | | |
| _ | | Firm/ Company | | | |
| | 3 (| Greenway Plaza #1 | 320 | | |
| _ | | Address | | | |
| | | Houston, Texas 7 | 7046 | ಲಾ | |
| | | City/ State and Zip Cod | e | <u> </u> | 021 |
| | fi | lings@swyftfilings.d | com | V.17 V.13 | Ä |
| | E-mail address: (to be u | sed for future annual report | notification) | | 9 |
| For further information of | concerning this matter, pleas | se call: | | OF STAT | AM 10: 20 |
| Sonia Be | ecerra | at (877 | 777-0450 | ודו | 0 |
| Name of | Contact Person | | de & Daytime Telephone I | Number | _ |
| Enclosed is a check for t | he following amount made | payable to the Florida Depa | urtment 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) | | |
| | ng Address Iment Section | | Address Iment Section | | |

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



May 27, 2021

SONIA BECERRA SWYFT FILINGS 3 GREENWAY PLAZA #1320 HOUSTON,, TX 77046 US

SUBJECT: AALL DEMO INC Ref. Number: P21000008736

We have received your document for AALL DEMO 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):

Please resubmit your filing on a full 8 1/2 x 11 sheet of paper so that the image will be legible.

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.

Letter Number: 521A00010341

Diane Cushing Senior Section Administrator

www.sunbiz.org

Articles of Amendment to **Articles of Incorporation** of

AALL DEMO INC

(Name of Corporation as currently filed with the Florida Dept. of State)

| | | - F41 1 C |
|--|---|--------------|
| P21000008736 | | 41.5 |
| (Document Number of Corporation | on (if known) | F 19 |
| ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Pros</i> s Articles of Incorporation: | ofit Corporation adopts the foll | owing amendm |
| . If amending name, enter the new name of the corporation: | | |
| | | The nev |
| name must be distinguishable and contain the word "corporation," "comportion," "Toorportion," "Corp.," "Inc.," or "Co". A property or "professional association," or the abbreviation "P.A." | | |
| Enter new principal office address, if applicable: | | |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | | |
| | | |
| | | |
| | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| (Making Littless MAT DE ATOST OFFICE BOX) | · · · · · · | |
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| . If amending the registered agent and/or registered office address in Flor | rida, enter the name of the | |
| new registered agent and/or the new registered office address: | | |
| Name of New Registered Agent | | |
| | | |
| (Florida street address) | | |
| N. D. t 100 A.U. | FI 11 | |
| New Registered Office Address: (City) | , Florida | (Zip Code) |
| | | |
| | | |
| ew Registered Agent's Signature, if changing Registered Agent: | | |
| hereby accept the appointment as registered agent. I am familiar with and acc | cept the obligations of the posit | ion. |
| | | |
| | | |
| | | |

Signature of New Registered Agent, if changing

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> <u>Jo</u> | ohn Doe | |
|-------------------------------|---------------------|---------------------|------------------|
| X Remove | <u>v</u> <u>M</u> | tike Jones | |
| X Add | <u>SV</u> Sa | ally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) X Change | Р | Alfred Matthias Jr. | 4206E REGNAS AVE |
| Add | | | TAMPA, FL 33617 |
| Remove | | | |
| 2) X Change | TRE | Alfred Matthias Jr. | 4206E REGNAS AVE |
| Add | | | TAMPA, FL 33617 |
| Remove | | | |
| 3) X Change | SEC | Alfred Matthias Jr. | 4206E REGNAS AVE |
| Add | | | TAMPA, FL 33617 |
| Remove | | | |
| 4) X Change | VP | Alfred Matthias Jr. | 4206E REGNAS AVE |
| Add | | | TAMPA, FL 33617 |
| Remove | | | |
| 5) X Change | DIR | Alfred Matthias Jr. | 4206E REGNAS AVE |
| Add | | | TAMPA, FL 33617 |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| Attach additional sheets, if necessary). | (Be specific) |
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| t an amendment provides for an exch | lange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued shares, and and in the amendment itself: |
| <u>provisions for implementing the ame</u> | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | endment if not contained in the amendment itself: |
| provisions for implementing the ame | endment if not contained in the amendment itself: |

| The date of each amendment(s) adoption: | , if other than th |
|--|--------------------------------------|
| 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 document's effective date on the Department of State's records. | , this date will not be listed as th |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval. | ndment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment | |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by" | |
| (voting group) | |
| The amendment(s) was/were adopted by the board of directors without shareholder action and sh action was not required. | areholder |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareh action was not required. | older |
| Dated $\frac{3}{12}$ $\frac{12}{2021}$ | |
| Signature | |
| (By a director, president or other officer – if directors or officers have n | ot been |
| selected, by an incorporator – if in the hands of a receiver, trustee, or of | |
| appointed fiduciary by that fiduciary) | |
| AIF-ed Matthius Jr. | |
| (Typed or printed name of person signing) | |
| President | |
| (Title of person signing) | |