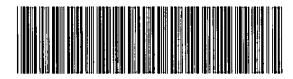
## P21000013432

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C. BRUMBLEY
JAN 1 9 2022

## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: ANDREA DIXON ENTERPRISE INC DOCUMENT NUMBER: P21000013432 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANDREA MUNROE-SERVICE Name of Contact Person ANDREA DIXON ENTERPRISE INC Firm/ Company 16371 NW 19TH ST Address PEMBROKE PINES, FL 33028 City/ State and Zip Code ANDSERVICE@COMCAST.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 ) 416-5571

Area Code & Daytime Telephone Number TAMDAR DIXON Name of Contact Person 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 Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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 of

poration:  poration, " "company, " or	n (if known)  Fit Corporation adopts the following amendm
Statutes, this <i>Florida Prof</i> poration:  poration, ""company, "or	
poration:  poration, " "company, " or	Tit Corporation adopts the following amendm
poration," "company," or	
poration, " "company, " or	
or "Co". A professionaliation "P.A."	The new princerporated or the abbreviation "Corp., and corporation name must contain the wor
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nce address:	
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(Florida street address)	
<i>A</i> ************************************	, Florida
(C W)	(Zip Code)
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ım familiar with and accep	of the obligations of the position.
re of New Registered Age	nt, if changing
	d office address in Floridatice address:  (Florida street address)  (City)  tered Agent: Im familiar with and acceptive of New Registered Agent (7.0120 (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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>b</u>	SERVICE-DIXON, ANDREA	
Add X Remove			
2) Change	P	MUNROE-SERVICE, ANDREA	16371 NW 19TH ST
X Add			PEMBROKE PINES FL 33028
Remove 3 ) Change	<u>v</u>	DIXON, TADMAR	16371 NW 19TH ST
XAdd			PEMBROKE PINES FL 33028
Remove			
4) Change			
Add			
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51 Change			
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6) Change			
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F. If an a	mendment provides fo	er an exchange, reclas	sification, or cance	llation of issued sha	res.
provis (i	mendment provides fo sions for implementing f not applicable, indicat	the amendment if no $SC(N/A)$	t contained in the	amendment itself:	<del></del>
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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, epartment 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 ad- action was not required.	opted by the incorporators, or board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes east for the amen afficient for approval.	dment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment.	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
bv		
•	(voting group)	
Dated $\frac{11/24}{2}$	1/2021// hlm Sem_	
(Bý a d	irector, president or other officer - if directors or officers have no	t been
appoin	d, by an incorporator – if in the hands of a receiver, trustee, or oth ted fiduciary by that fiduciary)	er court
	MUNROE-SERVICE, ANDREA	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	

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