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RECEIVED

COVER LETTER

TO: Amendment Section Division of Corporations		En	Lervice	
Division of Corporations	1/ /	1/	11(1)1100	
NAME OF CORPORATION:	Massic	Mare F	Herprise July Inc.	
DOCUMENT NUMBER:		2/00001	5621	
The enclosed Articles of Amendment	and fee are sub	mitted for filing.		
Please return all correspondence cond	erning this mat	ter to the following:		
		Byron Lak Name of Contact Perso		
		Name of Contact Perso	OT .	
	14/as	sic have En	Verprise Inc	
	•	Firm/ Company	•	
	10519	Maidstone Co	ive Or	
	_	Address /		
	<u> </u>	chsonville, ru	30218 de	
	. / /	City/ State and Zip Cod	le	
	Mass	ichare ento	Danail Con	
E-mail address: (to be used for future annual report notification)				
		_		
For further information concerning th	-	e call:		
Byron halalhar at 850 , 210-5663				
Name of Contact Pers	on	Area Co	ode & Daytime Telephone Number	
Enclosed is a check for the following	amount made p	ayable to the Florida Dep	partment of State:	
_	Filing Fee & ate 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)	
Mailing Address		Street Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 6327	*********	The Centre of Tallahassee		
Tallahassee, FL 32.	314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment

to
Articles of Incorporation

Klassia Van tor		1.10	
	erprise	INC	
(Name of Corporation as currently fi		Dept. of State)	
P210000150			
(Document Number of Co			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporati	on adopts the fo	llowing amendmen
A. If amending name, enter the new name of the corporation:	•		
			The new
name must be distinguishable and contain the word "corporation," "com "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pi "chartered," "professional association," or the abbreviation "P.A."	pany," or "incorpora ofessional corporati	ited" or the abbron name must o	eviation "Corp.," contain the word
B. Enter new principal office address, if applicable: iV/rl (Principal office address MUST BE A STREET ADDRESS)			
- -			1022 SEP 10
C. Enter new mailing address, if applicable: N/A			
(Mailing address MAY BE A POST OFFICE BOX)			
			PH
			
			
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the	name of the	•
Name of New Registered Agent	J/A		
			-
(Florida street a	ddress)		
New Registered Office Address:		Florida	
(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with	and accept the obliga	tions of the nosi	tion .
	, 10g4	<u>-</u> ,	
Signature of March Barrier			
Signature of New Regist	erea Agent, if changii	ng	
Check if applicable The amendment(s) is/are being filed nursuant to s. 607.0120 (11) (c). I	; ç		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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 = C. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title, list the first letter of each office holds more than one title holds.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. Ther 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT John	Doc	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	CEO	Byron Walker	10519 maidtone
Add		•	Jacksonville FICOVE
Remove		_	ا حدد
2) Change	CEO	Byron W. Walke	5 10519 maidston
Add		\ <u>_</u>	Jacksonville, Fl Cov.
Remove Change			32018
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach <i>additional</i> .	sheets, if necessary,	. 1			
		N/A			
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an amendment	provides for an ex	change, reclassifica	tion, or cancellatio	n of issued shares	1
<u>rovisions for im</u>	plementing the ar	nendment if not con	tained in the amer	idment itself:	
(if not applied	able, indicate N/A)	1			
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		 -			

The date of each amendment(s) adoption:	, if other th
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 document's effective date on the Department of State's records.	ot be listed
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sh action was not required.	areholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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	
by	
Dated9/9/31	
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 court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	