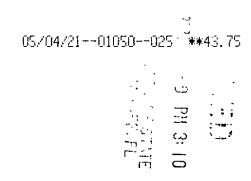
P2100001946Z

(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	city/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(0	Oocument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



300365430203





June 17, 2021

WILLIAM ST PHARD 7750 OKEECHOBEE BLVD #4-1051 W PALM BEACH, FL 33411

SUBJECT: 4U CARIBBEAN MULTISERVICE INC

Ref. Number: P21000019462

We have received your document for 4U CARIBBEAN MULTISERVICE INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please specify if our office is adding, removing or changing the information provided for William St Phard and Warren St Phard. If no changes are being made, please remove the information from the document.

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: 021A00013660

Terri J Schroeder Supervisor

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 4U Caribbean Multiservice Inc						
DOCUMENT NUMBER: P21000019462						
The enclosed Articles of	Amendment and fee are si	abmitted for filing.				
Please return all correspo	ndence concerning this ma	etter to the following:				
	W	/illiam St Phard				
_	Name of Contact Person					
	Firm/ Company					
	4462 Lake Tahoe Circle					
	Address					
_	West Palm Beach,FL33409					
		City/ State and Zip Cod	c			
		021@gmail.com				
	E-mail address: (to be u	sed for future annual report	notification)			
For further information co	oncerning this matter, plea	se call:				
William St	Phard	at (561	541-8565			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check for th	e following amount made	payable to the Florida Depa	artment 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)			
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

4U Caribbean Multiservice Inc.

☐ The amendment(s) is/are being filed pursuant to s, 607.0120 (11) (c), F.S.

	tly filed with the Florida Dept. of State)		
P21000019462			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)		
A. If amending name, enter the new name of the corporation:			
4U Multiservices Inc.	T		
name must be distinguishable and contain the word "corporation," 'Inc.," or Co.," or the designation "Corp," "Inc," or "Co". 'chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word		
3. Enter new principal office address, if applicable:	7750 Okeechobee Boulevard suite # 4-1052		
Principal office address <u>MUST BE A STREET ADDRESS</u>)	west Palm Beach,FL.33411		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7750 Okeechobee Boulevard suite #4-1052		
	west Palm Beach,FL.33411		
. If amending the registered agent and/or registered office add	Iress in Florida, enter the name of the		
new registered agent and/or the new registered office addres	<u>s:</u>		
Name of New Registered Agent			
(Florida st	reet address)		
New Registered Office Address:	Florida		
	(City) (Zip Code)		
ew Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	ti		
with weeth the appariament as registered agent. I am jamittar	with and accept the obligations of the position.		
Signature of New R	Registered Agent, if changing		
heck if applicable			

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)

Example:

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.

<u>PT</u>	John Dog	
<u>v</u>	Mike Jones	
<u>SV</u>	Sally Smith	
<u>Title</u>	Name	<u>Addres</u> s
<u>v</u>	Warrens St Phard	4462 Lake Tahoe Circle
		West Palm Beach.FL.33409
	<u> </u>	
	⊻ SV Title	V Mike Jones SV Sally Smith Title Name

E. If amending or a (Attach additional	dding additional Ar l sheets, if necessary).	ticles, enter cha (Be specific)	nge(s) here:			
N/A		, , ,				
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F. If an amendmen	t provides for an exc	change, reclassif	fication, or cance	ellation of issued	l shares.	
provisions for i	mplementing the an	endment if not	contained in the	amendment itse	elf:	
	cable, indicate N/A)					
N/A						
				_ _		
			<u>-</u>			
			-			
					 :	

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	05/01/2021	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
	07/02/2021	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	date)
	nis block does not meet the applicable statutory filing require Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	e adopted by the incorporators, or board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the sufficient for approval.	ne amendment(s)
	e approved by the shareholders through voting groups. The foll for each voting group entitled to vote separately on the amen	
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	1 of 1	
•	(voting group)	
	05/01/2021	
Dated		
Signature	Carrier	
	a director, president or other officer – if directors or officers l	have not been
· •	ected, by an incorporator – if in the hands of a receiver, trustee	
	pointed fiduciary by that fiduciary)	
	William St Phard	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	