P210000 21788

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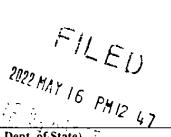
TO: Amendment Section Division of Corporations

2022 HAY 16 PM 2: 16

NAME OF CORPO	ORATION: THE MOUNTAIN	EERS CORP	C1 - 1 - 1	: ::::::::::::::::::::::::::::::::::::
DOCUMENT NUM	ABER: P21000021788		ALL AGE 17	,i,rt
	es of Amendment and fee are su	bmitted for filing.		
Please return all cor	respondence concerning this ma	tter to the following:		
	ADRIANA DELEON			
		Name of Contact Perso	n	
	THE MOUNTAINEERS CO	RP		
		Firm/ Company		
	3413 TROPICANA W PKW	• •		
		Address		
	CAPE CORAL, FL 33993			
		City/ State and Zip Cod	le	,
	aerlion3@aol.com			
	E-mail address: (to be us	sed for future annual report	t notification)	
For further informat	ion concerning this matter, plea	se call:		
Adriana Deleon		at (239) 887-5299 ode & Daytime Telephone Nun	
Name of Contact Person		Area Co	ode & Daytime Telephone Nun	nber
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:	
77			_	
\$35 Filing Fee	/ □\$43.75 Filing Fee &	☐\$43.75 Filing Fee &	□\$52.50 Filing Fee	
	Certificate of Status	Certified Copy	Certificate of Status	
	4762	(Additional copy is	Certified Copy (Additional Copy	
Mrecaly ech	' 1 ,	enclosed)	is enclosed)	
" CLUBITY" M	ailing Address	Street	Address	
\mathcal{L}^{\vee} $\frac{\Delta}{A}$	mendment Section		dment Section	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Divisi	on of Corporations	
		The C	Centre of Tallahassec	
		2415	N. Monroe Street, Suite 810)

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



THE MOUNTAINEERS CORP

(Name of Corporatio	on as currently filed with the Florida Dept. of State)
P21000021788	; ·
(Docume	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida is Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the con	rporation:
LE PETIT TEA ROOM CORP	The new
	orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word viation "P.A."
B. Enter new principal office address, if applicable:	. N/A
Principal office address <u>MUST BE A STREET ADD.</u>	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO)	<u>X</u>)
). If amending the registered agent and/or registere	rad affice uddress in blorids, onter the name of the
new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	Establish A manage
lew Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent. If	istered Agent: I am familiar with and accept the obligations of the position.
Ci	nture of New Registered Agent, if changing
Signa	nure 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>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>SV</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change			<u></u>	
Add				
Remove				-
6) Change				
Add				
Remove				

	ticles, enter change(s) here: (Be specific)
<u>.</u>	
	·
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y not approante, materia 1971)	
(y not applicable, marcale may	
(y not applicable, maleure (mn)	
(y not applicable, maleure may	,
(y not applicable, maleure (mn)	
(g not appreciate, marcare 1971)	,
(g no. approante, marcare 1971)	
(g not approxime, maneure 1971)	
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(g not approxime, marcale 1971)	

. . .

•	05/03/2022	
The date of each amendment(s date this document was signed.) adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in the document's effective date on the	is 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)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sl	nareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the sufficient for approval.	ne amendment(s)
	approved by the shareholders through voting groups. The fol- for each voting group entitled to vote separately on the amen	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
05/03/20	022	
Dated		
Signature	dan	
sele	a director, president or other officer – if directors or officers leted, by an incorporator – if in the hands of a receiver, trusted ointed fiduciary by that fiduciary)	
	ADRIANA DELEON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	