P21 0000 22590

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2022 AUG 22 PM 2: 5

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MAKE SENSE S.	ALES & LEASING INC	
DOCUMENT NUM	BER: P21000022590		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	MAURICE ROBINSON		
	•	Name of Contact Persor	1
	FIRM OF ROBINSON CRA	IG & ROGERS INC	
		Firm/ Company	
	941 S ORANGE BLGSSOM		
		Address	
	APOPKA, FL 32703		
		City/ State and Zip Code	2
	MROBINSCPA@YAHOO.C	СОМ	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call: at (407	841-1195
Name	of Contact Person	Area Co	de & Daytime Telephone Number
	or the following amount made		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$ 13.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division The Co 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2022 AUG 22 PM 2:50

MAKE SENSE SALES & LEASING INC

(Name of Corporation as cur	rrently filed with the Florida Dept. of State) (10 1 10
P21000022590	TALLAHASSEE, FI
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>en:</u>
	The new
name must be distinguishable and contain the word "corporatio". Inc., " or Co.," or the designation "Corp," "Inc.," or "Co. "chartered," "professional association," or the abbreviation "	on," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	e address in Florida, enter the name of the didress:
Name of New Registered Agent	
<u> </u>	
(Flor	rida street address)
New Registered Office Address:	, Florida
	(2),
New Registered Agent's Signature, if changing Registered 3	Agent:
Thereby accept the appointment as registered agent. I am fam	niliar with and accept the obligations of the position.
Simultary of A	New Registered Agent, if changing
Signature of t	The state of the s
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120	J (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 Jone	<u>s</u>	
X Add	<u>sv</u>	Sally Smit	<u>h</u>	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	lame	<u>Addres</u> s
1) Change	VPD		YRONE SHUMAN	1660 S ORANGE BLOSSOM TR
Add				APOPKA, FL 32703
X Remove				
2) Change				
Add				
Remove Change				
Add				
Remove				
4) Change				<u>-</u>
Add		·		
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	or adding add onal sheets, if	necessary).	(Be specific)					
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an amendπ	nent provides	for an excha	nge, reclassi	fication, or c	ancellation o	f issued share	es,	
orovisions 10 (if not at	o <u>r implement</u> oplicable, indi	ing the ameno	iment if not	contained in	the amendi	ient itseif:		
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	AUGUST 17, 2022		
The date of each amendment(s) adoption: date this document was signed.	:	_, if other the	an the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		
Note: If the date inserted in this block doo document's effective date on the Departmen	es not meet the applicable statutory filing requirements, this date will rett of State's records.	not be listed	as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without shareholder action and s	hareholder	
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.		
must he separately provided for each vo	by the shareholders through voting groups. The following statement oring group entitled to vote separately on the amendment(s):	2022 AUG	1-77
"The number of votes cast for the t	amendment(s) was/were sufficient for approval	22	CHECKER !
by	(voting group)	PM 2: 50	
08/17/22 Dated		: 50	
Signature anthu		_	
selected, by an	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court ciary by that fiduciary)		
ANTHO	ONY SHUMAN		
	(Typed or printed name of person signing)		
PRESI	DENT		
	(Title of person signing)		