## P21000022803

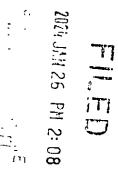
(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

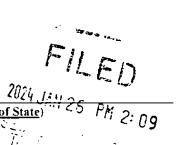
Tallahassee, FL 32314

NAME OF CORPO	RATION: PURE LIFE & BA	LLONS INC	
DOCUMENT NUM	BER: P21000022803		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	ADRIANA I DIAZ		
		Name of Contact Persor	l
	STAR TAXES INC		
		Firm/ Company	
	13088 SW 132ND CT		
		Address	
	MIAMI, FL 33186		
		City/ State and Zip Code	:
	ADRIANA@STARTAXESI	NC.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas		
Name	of Contact Person	at ( Area Coo	) de & Daytime Telephone Number
Enclosed is a check f	or the following amount made		
□ \$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)
An Div	illing Address tendment Section rision of Corporations D. Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State)

PURE LIFE EVENTS & BALLONS INC

(Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amet to Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  PURE LIFE EVENTS & BALLOONS INC  The name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Cor". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  The strength of the designation and the strength of the str				1.
A. If amending name, enter the new name of the corporation:  PURE LIFE EVENTS & BALLOONS INC  The name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS )  C. Enter new mailing address, if applicable:  (Mailing address MAYBE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:		(Document Numbe	er of Corporation (if known)	[7], ÷1
PURE LIFE EVENTS & BALLOONS INC  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Co". Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)  10 If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:		1006, Florida Statutes, tl	nis Florida Profit Corporation	adopts the following amendme
PURE LIFE EVENTS & BALLOONS INC  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Co". Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)  10 If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	A. If amending name, enter the new na	ime of the corporation:	_	
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Co". Inc.," or Co., " or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable:  (Mailing address MAYBE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	PURE LIFE EVENTS & BALLOONS II	NC		The new
B. Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  HOMESTEAD FL.  33033  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  HOMESTEAD FL.  330333  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	"Inc.," or Co.," or the designation "C	orp, " "Inc," or "Co".	A professional corporation	I" or the abbreviation "Corp.,"
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  HOMESTEAD FL.  33033  3216 SE 3RD DRIVE  HOMESTEAD FL.  330333  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	R. Enter new principal office address.	if applicable:	3216 SE 3RD DRIVE	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  HOMESTEAD FL.  3216 SE 3RD DRIVE  HOMESTEAD FL.  330333  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:			HOMESTEAD FL	
(Mailing address MAY BE A POST OFFICE BOX)  HOMESTEAD FL.  330333  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:			33033	
330333  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:			3216 SE 3RD DRIVE	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:			HOMESTEAD FL	
new registered agent and/or the new registered office address:			330333	
	new registered agent and/or the new			ame of the
(Florida street address)		(Florida	street address)	
New Registered Office Address: 3216 SE 3RD DRIVE HOMESTEAD , Florida , Florida	New Registered Office Address:	3216 SE 3RD DRIVE	HOMESTEAD	, Florida 33033
(City) (Zip Code)			(City)	
		Signature of Nev	v Registered Agent, if changing	
Signature of New Registered Agent, if changing	Chack 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,

<u>PT</u>	John Do	<u>c</u>	
<u>V</u>	Mike Joi	ne <u>s</u>	
<u>sv</u>			
<u>Title</u>		Name	<u>Addres</u> s
	_		
	_		
	_		
	<del></del>		
-	<del></del>		
	<u>v</u> <u>sv</u>	V Mike Jo SV Sally Sn	V Mike Jones  SV Sally Smith

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<del></del>	
	·
•	
A	
If 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:
<del></del>	

·. . . . . .

The date of each amendment(s) adoption: date this document was signed.  O1/16/2024  Effective date if applicable:  O1/16/2024
(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 be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
■ 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
(voting group)
Dated  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)  LAUREEN P GONZALEZ
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)