P21000028429

(Requestor's Name)
(Address)
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(City)Chata (Zia/Dhana 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
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Office Use Only



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COVER LETTER

Division of Corporations DROMU THE NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Primp+ Tax Ll C

Firm/Company

4873 Palm Coast Privy NW U4

Palm Coast Fl- 32/37

City/ State and Zip Code PROMPTOKO Gmail. Co 711

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tatyana Polansky at 386, 503-7721

Name of Contact Person V Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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



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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2021

TATYANA POLANSKY 4873 PALM COAST PKWY NW U4 PALM COAST, FL 32137

SUBJECT: DROLLY INC Ref. Number: P21000028429

We have received your document for DROLLY INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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.

Irene Albritton Regulatory Specialist III

Letter Number: 121A00023190



September 11, 2021

TATYANA POLANSKY 4873 PALM COASR PKWY NW U4 PALM COAST, FL 32137

SUBJECT: DROLLY INC Ref. Number: P21000028429

We have received your document for DROLLY INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The form submitted is for Benefit and Social purpose.

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.

Irene Albritton Regulatory Specialist III

Letter Number: 121A00021923

Articles of Amendment to Articles of Incorporation of

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A	crticles of Amendment
•	to Something to the state of th
	ticles of Incorporation of
_ DROlly Inc	as currently filed with the Florida Dept. of State)
(Name of Corporation	as currently filed with the Florida Dept. of State)
P21000028429	
	t Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida St	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
its Articles of Incorporation:	anchanically to
A. Hamending name, enter the new name of the corp.	oration.
and the leave manner of the Corp.	oration.
name must be distinguishable and southing the	The new
"Inc.," or Co.," or the designation "Corp." "Inc." or "Antered," "projessional association," or the abbrevia	oration," "company," or "incorporated" or the abbreviation "Corp.," r "Co" A professional corporation name must contain the word tion "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	9521 S. Ocarige Blossom Trail Unit 119
	<u>Orlando, FL 32827</u>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BON</u>)	9521 S. Deunge Blossom Teail Unit 119 Delando, FL 32827
	Unit 119
	Delando, FL 32327
D. If amending the registered agent and/or registered new registered agent and/or the new registered office	office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	
res registered Office Address;	, Florida, (Zip Code)
	(inp sont)
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	red Agent:
. The supportanted as registered agent, I am	Januara with and accept the obligations of the position
Signature	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	PT John D	<u> </u>	
X Remove	V Mike J	ones	
\underline{X} Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	MGR.	Mukhamedyakova, Gavkhak	1271 La Quinta Se
Add X Remove		7,0,0	Delando, FL 32809
2) Change	MGR	Mominovna, Sevgi	3271 Warrellsville Sente
Add Remove Change			Delando, FL 32809 3271 Waeeensville Sente Apt. 14 C Shakee Hts, OH 44122
Add			
Remove 4) Change			
Add			
Remove 5) Change			
Add			
Remove			
6) Change Add			
Remove			

	or adding additional sheets, if ne	ecessary).	(Be specific)				
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The date of each amendment(s) adoption: _		, if other than the
date this document was signed.		
Effective date <u>if applicable</u> ;		
	(no more than 90 days after	amendment file date)
Note: If the date inserted in this block does to document's effective date on the Department of		ry filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of dire	ectors without shareholder action and shareholder
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting		
"The number of votes cast for the ame	endment(s) was/were sufficient	for approval
by		
·	ting group)	
Dated09/29/	/202/	
Signature	Turk	
selected, by an inc	sident of other officer - if directorporator - if in the hands of a by by that fiduciary)	tors or officers have not been receiver, trustee, or other court
K170	CAIGE VA F (Typed or printed name of per	-Utima
		Ramkly
	MGR	
	(Title of person signing)	