P2100002870Z

(Re	questor's Name)	 _
(Ad	dress)	<u>.</u>
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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(Do	cument Number)
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R. WHITE AUG 1 : 2021



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BIG FAT MOE IN	C			
	BER: P21000028702				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	RHONDA LONGHORN				
		Name of Contact Persor	3		
	LEON P WILDE CPA INC				
		Firm/ Company			
	969 S FEDERAL HWY STE	#400			
	Address				
	STUART, FL 34994				
		City/ State and Zip Code			
	RHOJO@BELLSOUTH.NE	Г			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
RHONDA LONGHO	RN	at (772-220-7658		
Name of Contact Person		Area Coo	de & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	ortment 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)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

Articles of Incorporati
of

BIG FAT MOE INC

(Name	of Corporation as curren	itly filed with the Florida L	Dept. of State)
P21000028702			
-	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporatio	n adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
N/A	-		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "("chartered," "professional association,	Corp," "Inc," or "Co".	A professional corporatio	ed" or the abbreviation "Corp.,"
B. Enter new principal office address,	if applicable:	2971 SE DOMINICA	TERR
(Principal office address MUST BE A S		STUART, FL 34990	
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		N/A	
D. If amending the registered agent a	nd/or registered office ad	dress in Florida, enter the	name of the
new registered agent and/or the ne			
Name of New Registered Agent	N/A		
	2971 SE DOMINICA TE	ERR	
	(Florida :	street address)	-
New Registered Office Address:	STUART		. Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if a I hereby accept the appointment as regis			tions of the position.
	Signature of New	Registered Agent, if changi	10
	San		0
Check if applicable ☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11	(c), 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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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lf an amer	<u>idment provides f</u>	or an exchange, rec	lassification, or can	cellation of issued sh	ares.
provision	<u>is ior impiementin</u> t applicable, indica	<u>(g the amendment 11</u> ote N/4)	not contained in tr	ie amendment itself:	
[17 27/)	тиррисате, так	10.17			
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after an	nendment file dater
Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of direct action was not required.	ors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of verby the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups the separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient for	or approval
by	,
Signature (By a director, president or other officer – if director selected, by an incorporator – if in the hands of a reappointed fiduciary by that fiduciary) ANTHONY M SCALISE (Typed or printed name of person	ceiver, trustee, or other court
PRESIDENT	
(Title of person signing)	