P21 0000 37335

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SECRETARY OF STATE

7/8/2

COVER LETTER

TO: Amendment Section Division of Corporations INDONITIABLE INCOM NAME OF CORPORATION: DOCUMENT NUMBER: <u>P21000037335</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company INFO @ INDOWITABLE CORP. LOW E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 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) tAdditional Copy

Mailing Address

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

is enclosed)

Articles of Amendment to Articles of Incorporation of

INDOMITABLE INCORPORA	"TED				
(Name of Corporation as curre	otly filed with the Florida	Dept. of State)			
P21000034335					
• • • • • • • • • • • • • • • • • • • •	r of Corporation (if known)				
Pursuant to the provisions of section 607,1006, Florida Statutes, the its Articles of Incorporation:	is Florida Profit Corporati	on adopts the fo	llowing am	endmei	ıt(s) to
A. If amending name, enter the new name of the corporation:					
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co", "chartered," "professional association," or the abbreviation "P.,	A professional corporation	ted" or the abbr on name must	eviation "C	new orp ," word	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	6501 ARLI SUTTE BI JACKSONN	<u> 105-5</u>	011		NAC!
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX	•			•
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addre	JACKSON	,	FC 32	 <u>22</u> 3	6
Name of New Registered Agent				202	
tFlorida :	street address)		CRE	- NOF L	T
New Registered Office Address:		. Florida	治室	Ī.	ند حست
	ıCııçı	Plonda	OF THE POLICE	7 AM 3:	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	nt: · with and accept the obliga	tions of the pos	FL MIE	01 :	
	Registered Agent, if changi	ng			
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)

Example:

Please note the officer director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ V = Vice \$

Changes should be noted in the following manner. Currently John Doc 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.

X Remove	V ACIDA		
X Kemove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove 2)	<u>vp</u>	KEVIN B. WALKER	6039 APRICE DRIVE JACKSONVILLE, FL. 32210
Remove 3.) Change			
Add Remove 4)	<u>TRE</u> A	KEVIN B. WALKER	6039 CAPRICE DRIVE TACKSONNILLE, FC. 32210
Remove 51 Change Add			
Remove 6) Change Add			

	adding additional Articl il sheets, if necessary).	(Be specific)			
					
			 _		
	 -				
					<u>.</u>
					
					
f an amendme	nt provides for an excha	nge, reclassification	i, or cancellation of i	ssued shares,	
provisions for	implementing the amend	nge, reclassification dment if not contain	i, or cancellation of it red in the amendmer	ssued shares, it itself:	
provisions for	nt provides for an exchaing the amendicable, indicate NA()	nge, reclassification dment if not contain	i, or cancellation of it ned in the amendmer	ssued shares, it itself:	
provisions for	implementing the amend	nge, reclassification dment if not contain	i, or cancellation of it ned in the amendmer	ssued shares, at itself:	
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provisions for	implementing the amend	nge, reclassification dment if not contain	i, or cancellation of it	ssued shares, at itself:	

The date of each amendment(s) adoptions this document was signed.	on: 6/1/25	, if other than the
ffective date <u>if applicable</u> :	(no more than 90 days ofter amendment file da	de)
Note: If the date inserted in this block locument's effective date on the Depart	does not meet the applicable statutory filing requiremment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shar	eholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes east for the ent for approval.	amendment(s)
The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting groups. The follow twoting group entitled to vote separately on the amenda	wing statement nentiss:
"The number of votes east for t	he amendment(s) was/were sufficient for approval	
by	(voting group)	
selected, by	or, president or other officer - if directors or officers had an incorporator - if in the hands of a receiver, trustee, iduciary by that fiduciary) ARYL ANAR BURROW (Typed or printed name of person signing)	or other court

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