P21000038529

(Re	questor's Name)			
(Ad	dress)			
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(Cit	ry/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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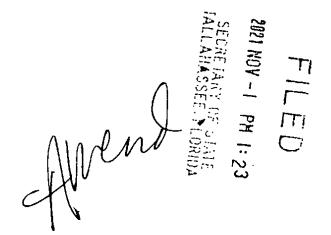
Office Use Only



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07/30/21--01017--022 **50.00

09/23/21--01030--015 **10.00



DEC 0 6 2021 D COMMELL Division of Corporations

September 28, 2021

JULIAN JOSEPH 7901 4TH ST N STE 300 ST PETERSBURG, FL 33702

SUBJECT: CAPITAL GAINS HOLDINGS INC.

Ref. Number: P21000038529

We have received your document for CAPITAL GAINS HOLDINGS INC. and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The form you submitted is for a LLC, but your entity is a CORPORATION. Please complete and return the enclosed blank form(s).

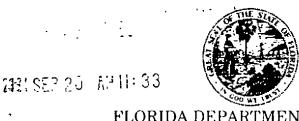
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 321A00023438

Rebekah White Regulatory Specialist II Supervisor

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2021

JULIAN JOSEPH 7901 4TH ST N STE 300 ST PETERSBURG, FL 33702

SUBJECT: CAPITAL GAINS HOLDINGS INC.

Ref. Number: P21000038529

We have received your document for CAPITAL GAINS HOLDINGS INC. and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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.

Letter Number: 221A00019413

Rebekah White Regulatory Specialist II Supervisor

www.sunbiz.org

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION:	Capital	Gains 1	Hadings Inc
DOCUMENT NUMBER:			
The enclosed Articles of Amend	<i>ment</i> and fee are sub	omitted for filing.	
Please return all correspondence	concerning this mat	ter to the following:	
	Julian	Joseph Name of Confact Person	1
	Capita	al Cains	Holding Inc N STE 300
	7901	4th St Address	N STE 300
	ST. P	City/ State and Ain Code	FL 33702
E-itm	al address: (to be use	O & gma/l. C	om/
For further information concern	ing this matter, pleas	e call:	
JUICAN Name of Contact	Joseph Person	at (201 Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	wing amount made t	payable to the Florida Dep	artment of State;
-	13.75 Filing Fee & rtificate 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)
Mailing Addr Amendment S Division of Co P.O. Box 632 Tallahassee, F	Section arporations 7	Ameno Divisio The C 2415	Address Idment Section on of Corporations Tentre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment

to

Articles	oſ	Incorporatio

(Name of Corporation as current)	ins Holdings INC ly filed with the Florida Bept. of State)	<u>.</u> •
(Document Number o	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following a	mendment(s)
A. If amending name, enter the new name of the corporation:		
	T	he new
name must be distinguishable and contain the word "corporation," "e "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain t	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	SEC.	2021
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	AHASSEE	#01-1-
	FLORIDA	= D
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		_
Name of New Registered Agent		
iFlorida sti	rcet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Cod	le)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am jamiliar v	<u>t:</u> with and accept the obligations of the position.	
Signature of New R.	Registered Agent, if changing	
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11):		

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, 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 <math>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

X Change	<u>PT</u> <u>John</u>	Doc	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	<u>sv</u> <u>Sally</u>	<u> Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	MGR	Julian V. Joseph	7901 4th St. STE 300
_ X Add		•	St. Petersburg, FL 337
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
o) Change		,	
Add			
Remove			

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The date of each an date this document v	nendment(s) adoption: _ was signed.	10/13/2	150	, if other than the
Effective date if app	olicable:	tua mora than 90	days after amendment fi	L. later
		(no more man 30	ааух анет ателатет н	n une
	serted in this block does date on the Department of		ble statutory filing requ	irements, this date will not be listed as the
Adoption of Ameno	fment(s) (<u>C</u>	HECK ONE)		
The amendment(saction was not rec		e incorporators, or be	ard of directors without	shareholder action and shareholder
	s) was/were adopted by the ers was/were sufficient fo		number of votes east for	the amendment(s)
	s) was/were approved by t ly provided for each votic			
"The numb	er of votes east for the am	endment(s) was/were	sufficient for approval	
by				,
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Di	ned 10/13/2	2021		
Si	gnature	A->		
31	(By a director, per selected, by an in		r – if directors or officer hands of a receiver, trus	
		JU JIAN C (Typed or printed no	Joseph ame of person signing)	
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