P21000061699

(Re	questor's Name)	
(Ade	dress)	
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	y/State/Zip/Phone	
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PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Name	e)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TAY DO VILLAG	E CORPORATION	
	IBER: P21000061699	. <u>.</u> .	
The enclosed <i>Article</i>	s of Amendment and fee are sub	omitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
	LOVETTE DOBSON		
		Name of Contact Person	
	INCFILE.COM LLC		
		Firm/ Company	
	17350 STATE HWY 249 STI	E 220	
		Address	
	HOUSTON, TX 77064		
		City/ State and Zip Code	•
	EFILE1234@INCFILE.COM	I	
	E-mail address: (to be us	ed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	462-3453
Name of Contact Person		Area Coo	le & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	S43.75 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)
A: D P.	ailing Address nendment Section vision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation

Articles of In	•	
of TAY DO VILLAGE		FILED
(<u>Name of Corporation as current</u> P21000	ly filed with the Florida De 202 061699	pt. of State) 21 AUG 15 PM 12: 43
(Document Number of	of Corporation (if known)	ORE LATE OF STATE
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:		
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.	A professional corporation	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		ame of the
Name of New Registered Agent		
(Florida st	reet address)	
New Registered Office Address:	(City)	Florida
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		ons of the position.

Signature of New Registered Agent, if changing

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DIR	SIVAN LAM	4205 PINE ISLAND RD NW
Add			MATLACHA, FL 33993
X Remove			
2) Change	DIR	TRUNG NGUYEN	208 HOBOKEN AVE
Add			TAMPA, FL 33612
X Remove 3) Change	DIR	EMILY TRUONG	640 S GAYMONT ST
Add			ANAHEIM. CA 92804
X Remove			
4) Change	DIR	TINA NGUYEN	10142 NORTHAMPTON AVE
Add			WESTMINSTER, CA 92683
X Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Ar (Attach additional sheets, if necessary)	. (Be specific)			
				
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		<u> </u>		
	1 -4"		6:) 1	
 If an amendment provides for an ex- provisions for implementing the an 				
(if not applicable, indicate N/A)				
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. . .

The date of each amendment(s) add date this document was signed.	pption:	, if other than th
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	artment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopaction was not required.	ted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	35	
	(voting group)	
AUGUST 9.	2021	
Dated		
Signature	allian Ram	
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
A	ILLISON PHAM	
_	(Typed or printed name of person signing)	
C	DIRECTOR/PRESIDENT	
-	(Title of person signing)	