P21000063816

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TO: Amendment Section
Division of Corporations

.:

NAME OF CORPO	RATION: 1 GOT A PRO INC			
DOCUMENT NUM	BER: P21000063816			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	ELIEZER SEYMORE MAR	TINEZ		
		Name of Contact Person	1	
	I GOT A PRO INC			
	<u> </u>	Firm/ Company		
	7413 CELESTE LN			
		Address		
	TAMPA, FL 33619			
		City/ State and Zip Cod	3	
	camilalopez@protaxfa.com			
		sed for future annual report	notification)	
For further information	on concerning this matter, plea	१।३	361-8370	
Name of Contact Person		at (de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
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

Articles of Amendment to Articles of Incorporation of

1 GOT A PRO INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P21000063816	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Tribelyal Office undress MOST DE ASTRIBET ADDRESS)	
	= = = = = = = = = = = = = = = = = = = =
	2121 13: 19 PH 3: 31
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(9
	<u></u>
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
	City) (7.ip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w.	ith 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)

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 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>	John Doe	
\underline{X} Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	HARVIN DIAZ MARTINEZ	506 NW 87TH AVE APT 109
Add			MIAMI, FL 33172
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary)). (Be specific)				
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an amendmen	provides for an ex	change, reclassif	ication, or cancel	llation of issued	shares,	
<u>provisions for in</u>	nplementing the an	iendment if not o	ontained in the	amendment itse	<u>lf:</u>	
(if not applie	able, indicate N/A)					
					 -	
						
		· · · · · · · · · · · · · · · · · · ·				
	.				<u>.</u>	· · · · · · ·
				<u>.</u>		

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The date of each amendment(s)	adoption;	, if other than the
date this document was signed.		
Effective date if applicable:		<u></u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholde	r action and shareholder
■ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	ment(s)
	approved by the shareholders through voting groups. The following store each voting group entitled to vote separately on the amendment(s).	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
selec	Clubs Samuel Warkers director, president or other officer – if directors or officers have not leted, by an incorporator – if in the hands of a receiver, trustee, or other officer fiduciary by that fiduciary)	
	ELIEZER SEYMORE MARTINEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	