Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : 120170000056

Phone

: (954)842-2931

Fax Number

: (954)842-2936

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Emall	Address	

COR AMND/RESTATE/CORRECT OR O/D RESIGN TODOCADA CORP

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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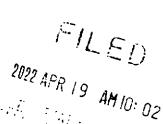
COVER LETTER

TO: Amendment Section
Division of Corporations

*

NAME OF CORPOR	RATION: TODOCADA CO	DRP	
DOCUMENT NUME	D31000066166		
The enclosed Articles	of Amendment and fee are s	ubmitted for filing.	
Please return all corres	pondence concerning this m	atter to the following:	
	IGNAS JURKONIS		
•		Name of Contact Perso	DII
	TODOCADA CORP		
-		Firm/ Company	
	525 NW IST AVE	, •	
·		Address	
_	FORT LAUDERDALE, FL	33301	
		City/ State and Zip Cod	e
	info@todocada.com		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea		
		at (_) 336-5555
iName of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	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)	Certificate of Status Certified Copy (Additional Copy is enclosed)
	ng Address		Address
	dment Section on of Corporations		ment Section
	Box 6327	Divisio	n of Corporations entre of Tallahassee
	assee, FL 32314	2415 N	I. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of



		7.70.02
(<u>Nam</u> 21000065456	e of Corporation as currently file	d with the Florida Dept. of State)
21000003430		
	(Document Number of Corp	poration (if known)
rsuant to the provisions of section 60 Articles of Incorporation:	17.1006, Florida Statutes, this Florid	da Profit Corporation adopts the following amendment
If amending name, enter the new	name of the corporation:	
me must be distinguishable and and		The new
hartered," "professional association	corp. Inc. or "Co". A prof or the abbreviation "P.A."	any," or "incorporated" or the abbreviation "Corp.," fessional corporation name must contain the word
Enter new principal office address must be A	s. if applicable: STREET ADDRESS)	
	- _	
Enter new mailing address, if app	olicable:	
(Mailing address MAY BE A POST	OFFICE BOX	
	_	
If amending the registered agont a	nd/or registered office address in	Florida, enter the name of the
new registered agent and/or the ne		
New registered agent and/or the ne	PURISHERED Office address:	VICIO
new registered agent and/or the ne	JURKONIS, IGNAS	
nesy registered agent and/or the ne	PURISHERED Office address:	
New registered agent and/or the ne	JURKONIS, IGNAS 525 NW 1st Ave (Florida street addr	
New registered agent and/or the ne	JURKONIS, IGNAS 525 NW 1st Ave	

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)

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

 $P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO <math>\times$ Chief Executive Officer: CFO \times 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	PΥ	John Doe			
X Remove	У	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	Address		
1) Change	P	JURKONIS, IGNAS	525 NW 1st Ave		
Add Add			FORT LAUDERDALE, FL 3330		
Remove					
2) Change	P	BRUZAS, EVALDAS	525 NW 1st Ave		
Add			FORT LAUDERDALE, FL 3330		
X Remove Change	<u>vp</u>	JONAS, SAKAVICKAS	525 NW 1st Ave		
Add			FORT LAUDERDALE, FL 33301		
X Remove					
4) Change		· · · · · · · · · · · · · · · · · · ·			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add		,			
Remove					

(g or adding additional A itional sheets, if necessary,). (Be specific)			
					
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If an amend	ment provides for an exc	hange, reclassification	on, or cancellation	of issued shares.	
2.0.1310113	AL TITT DIEDICALCHIE LIKE ALL	endment if not conta	ined in the amends	nent itself:	
(ij not a	pplicable, indicate N/A)			-	
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The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
04/19/2022 Dated
Signature Agnas Junkonis
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
JURKONIS, IGNAS
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)