18884530509

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(((H21000381203 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TAX ZONE INC. Account Number : I20190000044 : (407)888-3131 Phone : (888)453-0509 Fax Number

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

Email Address: OCCOUNTY + 10 to 2000 FT COM

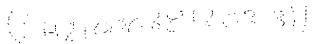
COR AMND/RESTATE/CORRECT OR O/D RESIGN DIANA STILSO PA

Certificate of Status	0
Certified Copy	0
Page Count	07
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OCT 1 3 2021

S. PRATHER

From: Tax Zone



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	RPORA	TIÓN: DIANA STILSO P.	Α	
DOCUMENT A	NUMBE	R: P21000065742		
The enclosed A	ticles of	Amendment and fee are sub	omitted for filing.	
Please return all	correspo	ndence concerning this mat	ter to the following:	
	EI	ODIE KOTLER		
		<u> </u>	Name of Contact Person	
	17	AX ZONE INC		
	_		Firm/ Company	
	88	65 COMMODITY CIR ST	•	
			Address	
	O	RLANDO, FL 32819		
			City/ State and Zip Cod	c
	A	CCOUNTANT@TAXZON	IVFL.COM	
			ed for future annual report	notification)
For further info		oncerning this matter, pleas		888-3131
		Contact Person	at (,	888-3131 de & Daytime Telephone Number
Ī	Name of	Contact Person	Alca Co	de de Dayanie refejment ratios.
Enclosed is a ch	ieck for t	he following amount made	payable to the Florida Dep	artment of State:
S35 Filing	Fee	☐\$43,75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Division The C 2415	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assec, Ft. 32303	

Articles of Amendment (3)	TALL	2021
10		8
Articles of Incorporation of	AS	
DIANA STILSO PA	33S XX	T 12 A
(Name of Corporation as currently filed with the Florida Dept. of State)		<u>-≥</u> (
	FLOR	A.H 10:
P21000065742 (Document Number of Corporation (if known)	- 30 A A D A	-:-0
Pursuant to the provisions of section 607.1606, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ing amen	idment(s) to
A. If amending name, enter the new name of the corporation:		
DIANA STILSON PA	The	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevia "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must cont "chartered," "professional association," or the abbreviation "P.A."	tion "C.o. ain the s	vord
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(Mailing address MAT BE AT GOT OCT REBOT)		
<u>, </u>		
,		- .
D. If amending the registered agent and/or registered office address in Florida, enter the name of the		
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida street address)		
·		
New Registered Office Address: , Florida (City) (Z.	D Code)	
(1.11)	,	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	ti.	
Signature of New Registered Agent, if changing	<u> </u>	
Dig 2 37 2 37 2 40		
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.		

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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.

X Change	PT	<u>John</u> Do	<u>5</u> 5	
X Remove	<u>v</u>	Mi <u>ke Jo</u>	ones	
<u>X</u> Add	<u>SV</u>	Sally St	nith	
Type of Action (Check One)	.Title		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		-		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change			• · · · · · · · · · · · · · · · · · · ·	
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	·	_		
Add				
Remove				

additional sheets, if n	itional Articles, enter	change(s) here:		
т авитовин знесть, у н	entermine by the character	v = 7		
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mendment provides sions for implement f not applicable, indi	s for an exchange, rec ting the amendment i icate N/A)	lassification, or co f not contained in	nncellation of issu- the amendment it	ed shares, self:
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	(C 1/21/06/38/12033/11	, if othe	i than (the
The date of each i date this document	mendment(s) adoption:			,,,,,
	10/12/2021			
Effective date <u>if a</u>	pplicable: (no more than 90 days after amendment file date)		-	
Note: If the date document's effection	inserted in this block does not meet the applicable statutory filing requirements, this date will ve date on the Department of State's records.	l not be lis	ted as	the
Adoption of Ame	ndment(s) (CHECK ONE)			
The amendmen action was not	t(s) was/were adopted by the incorporators, or board of directors without shateholder action and required.	l sharebold	er	
The amendment by the shareho	t(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) lders was/were sufficient for approval.			
must be separe "The nur	t(s) was/were approved by the shareholders through voting groups. The following statement ately provided for each voting group entitled to vote separately on the amendment(s): above of votes cast for the amendment(s) was/were sufficient for approval (voting group)	SECRETARY OF TALLAHASSEE, F	2021 OCT 12 AM 10: 50	FILED
	10/12/2021 Dated	Y OF STATE EE, FLORIDA	1 10: 50	
	(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)			
	DIANA STILSON		_	
	(Typed or printed name of person signing)			
	PRESIDENT		_	
	(Title of person signing)			