## P21000065992

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Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: M'.R. GIKE CORI	· · · · · · · · · · · · · · · · · · ·			
	BER: P21000065992				
The enclosed Articles	s of Amendment and fee are sul	omitted for filing.			
Please return all corre	espondence concerning this mat	tter to the following:			
	SARA J CALVO				
		Name of Contact Person	<u> </u>		
CREATIVE TAX SOLUTIONS INC					
		Firm/ Company			
	550 SW Sadwick Avenue				
	Address				
	Port St Lucie, FL 34953				
	City/ State and Zip Code				
SARAJOCALVO@GMAIL.COM					
E-mail address: (to be used for future annual report notification)					
For further information	on concerning this matter, pleas	se call:			
SARA JO CALVO		786 at (	) 382-1913 de & Daytime Telephone Number		
Name of Contact Person		Area Coo	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 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

Amendment Section Division of Corporations P.O. Box 6327 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

## Articles of Amendment to Articles of Incorporation

of

MT.R. GIKE CORP	
(Name of Corporation as current)	v filed with the Florida Dept. of State)
P21000065992	.,
(Document Number of	f Corporation (if known)
	·
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
no Atticles of Incorporation.	
A. If amending name, enter the new name of the corporation:	
MR. GIKE CORP	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."	
	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1 - 1
)	
C. Enter new mailing address, if applicable:	N/A
(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	<u>:</u>
Name of New Registered Agent	N/A
	۲
	vet address)
New Registered Office Address:	, Florida
	(ent)
New Registered Agent's Signature, if changing Registered Agent	:
hereby accept the appointment as registered agent. I am familiar v	
	t
	<i>λ</i> \ / Δ
	N/F
Signature of New R	egistered 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)

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		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	N/A	<u>Addres</u> s
1) Change			N/A	
Add				
Remove				
2) Change	<del></del>			
Add				
Remove Change				
Add				
Remove				
4) Change			<u> </u>	
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Remove				
5) Change				
Add				
Remove				
6)Change				
Add				
Remove				

Attach additional sheets, if i	necessary). — (Be sp	recific)			
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f an amendment provides	for an avahanga r	endersifianties (	or consollation o	ficewood charge	
provisions for implementi	ing the amendmen	t if not contained	d in the amendr	ent itself:	
(if not applicable, indi	cate iv/A)	* 1 / A	+		
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The date of each amendment(s) adoption: _		, if other than the
date this document was signed.		
7/20/2021 Effective date <u>if applicable</u> :		
Energy date in applicame.	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requiren of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
■ The amendment(s) was/were adopted by th action was not required.	ne incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient fo	ne shareholders. The number of votes east for the or approval.	amendment(s)
	the shareholders through voting groups. The following group entitled to vote separately on the amenda	
"The number of votes cast for the am	nendment(s) was/were sufficient for approval	
by	,	
	oting group)	
Dated 7/29/2021 Signature (By a director, pro	sident or other officer – if directors or officers ha	ve not been
selected, by an in-	corporator – if in the hands of a receiver, trustee, ry by that fiduciary)	or other court
RACHEL	. VALLEJO	
	(Typed or printed name of person signing)	
PRESIDE	ENT	
	(Title of person signing)	<del></del>