P210000666650

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE
1/20





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2022 JAN 20 AM II: 57 SECRETARY OF STARY





December 16, 2021

BRYAN PINERO 7317 CREPE MYRTLE WAY SARASOTA, FL 34241 US

SUBJECT: KOALAGRIP INC. Ref. Number: P21000069650

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a LLC, but your entity is a CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 921A00030459

Jasmine N Horne Regulatory Specialist II

www.sunbiz.org

COVER LETTER

O: Registration Section Division of Corporations
UBJECT: KOCIA Grip INC. Name of Limited Liability Company
Name of Limited Liability Company
he enclosed Articles of Amendment and fee(s) are submitted for filing.
lease return all correspondence concerning this matter to the following:
Bryan Pinero Name of Person
Locala Grip Inc.
Firm/Company
7317 Crape Myrtle way
Sarascita/Florida, 34241 City/State and Zip Code
E-mail address: (to be used for future annual report no lification)
for further information concerning this matter, please call:
Bryan Pintro at (941) 914 8540 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
inclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

2022 JAN 20 AM II: 57 (Name o (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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) 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 New Registered Office Address: (City) 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.

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)

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 De	<u>oe</u>		
X Remove	<u>V</u>	Mike Jo	ones		
X Add	<u>sv</u>	Sally S	mith		
Type of Action (Check One)	<u>Title</u>	′D	Name	0	Address
1) Change \(\forall \)	2 Miles		Bryan	Pinero	7317 Crape myrthe
Add					may savasota, florida
Remove					34241
2) Change		_			
Add					
Remove 3) Change					
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add					
Remove					

f amending or adding additional Ar Attach additional sheets, if necessary).	(Be specific)				
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			<u> </u>		
			<u></u>		
· · · · · · · · · · · · · · · · · · ·					
f an amendment provides for an exc	hange, reclassific	cation, or cance	llation of issued sl	hares,	
<u>provisions for implementing the am</u> (if not applicable, indicate N/A)	endment if not co	ontained in the	amendment itself	<u>:</u>	

The date of each amendment(s) adoption date this document was signed.	:_Novemb	er 4 ⁿ	2021	, if other than the
Effective date <u>if applicable</u> :				 .
	(no more than 90	days after a	mendment file date)	
Note: If the date inserted in this block do- document's effective date on the Departmen		ible statutory	r filing requirements,	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were adopted by action was not required.	the incorporators, or b	oard of direc	tors without sharehol	der action and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient		number of v	otes east for the amer	ndment(s)
☐ The amendment(s) was/were approved b must be separately provided for each vo				
"The number of votes east for the a	amendment(s) was/wer	e sufficient f	or approval	
by			,,,	
•	(voting group)	-		
Dated Jahva	ny 17th 202	.2_		
Signature	WIND.			
selected, by an	president or other office incorporator – if in the riary by that fiduciary)			
	William	Marti	\sim	
	(Typed or printed n	ame of perso	on signing)	
	President	_		
	(Title of person sign	ning)		