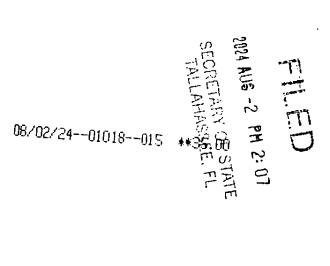
P21000070423

(Req	(Requestor's Name)		
(Adda	ress)		
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(4.1.1			
(Addi	ress)		
(City/	/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(D.,)	C.V. VI.	>	
(Busi	ness Entity Nar	ne)	
(Doci	ument Number)		
Certified Copies	Certificates	s of Status	
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Special Instructions to Fi	iling Officer:		
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: AUCTIONS 4 AM	MERICA INC.		
	MBER: P21000070423			
The enclosed Artic	les of Amendment and fee are st	bmitted for filing.		
Please return all co	rrespondence concerning this ma	atter to the following:		
	CARYN PRENTICE			
		Name of Contact Persor	 1	_
	AUCTIONS 4 AMERICA IS	NC.		
		Firm/ Company		_
	6330 N ANDREWS AVE #3	347		
	· -	Address		_
	FORT LAUDERDALE FL	33309		
		City/ State and Zip Code	2	_
	AUCTIONS4AMERICA@C	GMAIL.COM		
	E-mail address: (to be u	sed for future annual report	notification)	
For further informa	ation concerning this matter, plea	se call:		TALL/AHASSEE, FL
CARYN PRENTIC	CE .	954 	297-5876	ARY HAS
Nan	ne of Contact Person	Area Co	de & Daytime Telephone Numb	er낊우
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	STAT E, FL
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)	m
Д Р	Agailing Address Amendment Section Division of Corporations 2.O. Box 6327 Callahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

2024 AUS -2 PH 2:

Articles of Amendment to Articles of Incorporation of

(Name of Corp.	oration as currently filed with the Flor	rida Dept. of State)		
(D	Document Number of Corporation (if kno	own)		
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	lorida Statutes, this Florida Profit Corpo	oration adopts the fo	ollowing amendme	nt(s) to
A. If amending name, enter the new name of t	the corporation:			
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," ' "chartered," "professional association," or the c	"Inc." or "Co". A professional corpe	rporated" or the abb oration name must	The new reviation "Corp.," contain the word	
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)	-		
D. If amending the registered agent and/or re- new registered agent and/or the new registered.	gistered office address in Florida, ente ered office address:	er the name of the	2024 AUS -2 SECRETARY TALLAHAS	1494
Name of New Registered Agent		·	٠,٠,٠,٠	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(Florida street address)		RY OF ST	T
New Registered Office Address:	(City)	Florida		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	g Registered Agent:	obligations of the po.	sition.	
 	Signature of New Registered Agent, if co	hanging		
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)

_ Remove

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 Doc, 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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	<u>P</u>	CARYN PRENTICE	6330 N ANDREWS AVE #347
Add			FORT LAUDERDALE FL 33309
Remove			
2) X Change	VP	THOMAS JULIANO	1307 RIVER HILLS CIRCLE
Add			EAST #10
Remove 3) Change			JACKSONVILLE FL 32211
Add			2024 SEC T/
Remove			—————————————————————————————————————
4) Change			
Add			
Remove			2: 08
5) Change			
Add			
Remove			
6) Change			
Add			

E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ac action was not required.	lopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statemen reach voting group entitled to vote separately on the amendment(s):	t .
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	CARYN PRENTICE	(/) Na
	(Typed or printed name of person signing)	TA
	PRESIDENT	AUS .
	(Title of person signing)	2 PH 2: 08 RY OF STATE HASSEE, FL