## P21000076074

(Re	questor's Name)	
h)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

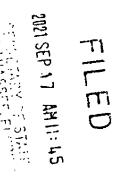
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: NORTHSIDE PER	FORMANCE INC.		
DOCUMENT N	UMBER: P21000076074			
	cles of Amendment and fee are su	bmitted for filing.		
Please return all c	orrespondence concerning this ma	tter to the following:		
	Michael Hesse			
		Name of Contact Person		
	Northside performance			
	W-1	Firm/ Company		
	4886 SE. Askew Ave.			
		Address		
	Stuart. Florida 34997			
	<del></del>	City/ State and Zip Code	2	
	mike86572@aol.com			
_		sed for future annual report	notification)	
For further information concerning this matter, pleas Michael Hesse			519-6170	
N	ame of Contact Person	Area Co	) 519-6170 de & Daytime Telephone Number	
Enclosed is a che	ck for the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fo	See S43.75 Filing Fee & Certificate of Status	S43.75 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 Tallahassec, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILE
2021 SEP 1
35 17 A
AM

The new ame 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."  3. 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)	Northside performance Inc.	or currently filed with the Florida Dent of State)	
(Document Number of Corporation (if known)  Tursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments Articles of Incorporation:  The new amendments be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  Florida  Florida	·	is currently theo with the riotida Dept. or State)	45
The new mailing address MUST BE A STREET ADDRESS)  Enter new mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address:  Name of New Registered Agent  [Florida Street address]  New Registered Office Address:  A reticles of Incorporation adopts the following amendments Articles of Incorporation:  The new professional corporation or the abbreviation "Corp." and professional corporation name must contain the word chartered. "professional association," or the abbreviation "P.A."  Enter new principal office address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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 address:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  Florida		10 kg / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /	<del></del>
S Articles of Incorporation:  If amending name, enter the new name of the corporation:  The new ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word chartered," "professional association," or the abbreviation "P.A."  S. 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  (Florida street address)  New Registered Office Address:  Florida	(Docume	Number of Corporation (if known)	٠.
The new mast 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."  3. 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  (Florida street address)  New Registered Office Address:  Florida  Florida		itutes, this Florida Profit Corporation adopts the following amen	dmer
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ame 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."  8. 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  (Florida street address)  New Registered Office Address:  Florida  Florida		The	41/21/11
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(Florida street address)  New Registered Office Address:		<del></del>	
New Registered Office Address: Florida	Name of New Registered Agent		
New Registered Office Address:			
		(Florida street address)	
	New Registered Office Address:		
		(City) (Zip Code)	
	New Registered Agent's Signature, if changing Regis	ered Agent:	

Signature of New Registered Agent, if changing

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 Doe	
X Remove	<u>V</u>	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) Change	p	Michael Hesse	4886 Sc. Askew Ave.
X Add			Stuart Florida 34997
Remove			
2) Change			
Add			
Remove 3 ) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			<del></del>
Remove			

	. (Be specific)			
	<del></del> ·			
				<del></del>
		<del></del>		
				· · · · · · · · · · · · · · · · · · ·
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		-4 H-4	<b></b>	
an amendment provides for an ex	change, reclassific	ation, or cancellat	ion of issued share	<u>es.</u>
provisions for implementing the an	change, reclassific	ation, or cancellat	ion of issued share endment itself:	<u> 25.</u>
an amendment provides for an exprovisions for implementing the an (if not applicable, indicate N/A)	change, reclassific nendment if not co	ation, or cancellat ntained in the am	ion of issued sharendment itself:	<u>25.</u>
provisions for implementing the an	change, reclassific tendment if not co	ation, or cancellat ntained in the am	ion of issued sharendment itself:	<u>.s.</u>
provisions for implementing the an	change, reclassific nendment if not co	ation, or cancellat ntained in the am	ion of issued sharendment itself:	<u> </u>
provisions for implementing the an	change, reclassific nendment if not co	ation, or cancellat ntained in the am	ion of issued share endment itself:	<u>es.</u>
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provisions for implementing the an	change, reclassific	ation, or cancellat	ion of issued sharendment itself:	<b>25.</b>
provisions for implementing the an	change, reclassific nendment if not co	ation, or cancellat	ion of issued sharendment itself:	<u></u>

e e

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, t document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholde action was not required.	er action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following s 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)	
9/13/21	
Dated	
Signature Signature	-
(By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or other	
appointed fiduciary by that fiduciary)	
Michael Hesse	
(Typed or printed name of person signing)	
President	

(Title of person signing)