## P21000078505

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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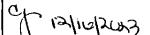




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2023 DEC -4 Kil 8: 30



## **COVER LETTER**

¿TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SWALLOWTAIL	CONSULTING INC.			
DOCUMENT NUM	P21000078505	··-			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	DYLAN ROBINSON				
		Name of Contact Person	1		
	SWALLOWTAIL CONSULTING INC.				
	<del></del>	Firm/ Company			
	1659 BRANDYWINE ROAI	D APT, 6113			
		Address			
	WEST PALM BEACH, FL 33409				
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·		
	DYLAMERINE@YAHOO.0	COM			
	•	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:at ( <sup>202</sup>	560-4620		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	ertment of State:		
■ \$35 Filing Fee	☐\$43.75 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			Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee FI 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SWALLOWTAIL CONSULTING INC.	2023 DEC -4 AN 8: 30
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P21000078505	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
BLOOD PRESS INC.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.,	"company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered office at new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: or 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 (1	1) (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)

Example:

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 Remove         Y         Mike Jones           X Add         SV         Sally Smith           Type of Action (Check One)         Title         Name         Address           1)         Change	
Type of Action (Check One)         Title         Name         Address           1)         Change	
(Check One)  1) Change	
2) Change	
Remove	
Add	
Remove	
4) Change	
Add	
Remove	
5) Change	
Add	
Remove	
6) Change	
Add	
Remove	

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/4)		nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
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(if not applicable, indicate N/A)	F. Hana	nendment provides for an exchange, reclassification, or cancellation of issued shares,
(i) not applicable, malcale N/A)	T. T. (1. 1. 1.	tions for implementing the amendment if not contained in the amendment itself:
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The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date if applicable:		
- Effective date it appreciate.	(no more than 90 days after amendment file	date)
<b>Note:</b> If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes east for the officient for approval.	ne amendment(s)
☐ The amendment(s) was/were appropriately provided for	proved by the shareholders through voting groups. The following group cntitled to vote separately on the amen	llowing statement idment(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated Signature {By a d selecte	irector, resident or other officer – if directors or officers d, by an incorporator – if in the hands of a receiver, trusted ted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	President (Title of person signing)	