## P21000080251

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	<del>= #)</del>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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November 8, 2021

POPMIN OF FLORIDA INC 9450 NW 5TH STREET PEMBROKE PINES, FL 33024

SUBJECT: POPMIN OF FLORIDA INC

Ref. Number: P21000080251

We have received your document for POPMIN OF FLORIDA INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The complete document was not received by our office.

We are enclosing the proper form(s) with instructions for your convenience.

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: 221A00023723

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

Division of Comparations B.O. DOY GOOD W. U. 1

## **COVER LETTER**

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: POPMIN OF FLORIDA INC
DOCUMENT NUMBER: 12/000080251
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Anthon J CAPPELLA  Name of Contact Person
Name of Contact Person
Arthur J CAPPELLA CPA Firm/ Company
Firm/ Company
9450 NW 5 5T
Address
Pemisnone Plais, FL 33024
City/ State and Zip Code
ANT 1145 @ AUC. CUM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
AnThun Cappella at (954) 432-3640  Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)  \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)  \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment Articles of Incorporation of

POPMIN OF	FLORIDA INIC
(Name of Corporation as cu	rrently filed with the Florida Dept. of State)
P210000	280251
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:
	The new
name must be distinguishable and contain the word "corporation". Inc.," or Co.," or the designation "Corp." "Inc," or "Corporation" or the abbreviation "chartered," "professional association," or the abbreviation."	on," "company," or "incorporated" or the abbreviation "Corp.,"  o" A professional corporation name must contain the word
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	e address in Florida, enter the name of the
new registered agent and/or the new registered office ad	ldress:
Name of New Registered Agent	
	rida street address)
	and are or mini easy
New Registered Office Address:	(City) , Florida (Zip Code)
	(Lip Code)
New Registered Agent's Signature, if changing Registered A	Agent:
I hereby accept the appointment as registered agent. I am fam	illiar with and accept the obligations of the position.
Signature of N	New Registered Agent, if changing
· · ·	to together the regent, if thanking
Check if applicable	V/II) / ) P.C.
☐ The amendment(s) is/are being filed pursuant to s. 607.0120	(11) (e), r.S.

## ARTICLE III OFFICERS AND/OR DIRECTORS (optional)

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
l) Change	p	Pamela Buete	408 Hasting St
X Add			Boca Raton Fl 33487
Remove			
2) Change	p	Pamela Butte	408 Hasting St
Add			Boca Raton FI 33487
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			_
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	_		
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f an amendment provides for an excl provisions for implementing the ame	hange, reclassification	or cancellation of	issued shares,	
(if not applicable, indicate N/A)			- III III	
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The date of each amendment(s) ad	ontion.	42
date this document was signed.	option;	, if other than the
Decario di Alife II di		
Effective date <u>if applicable</u> :	(no more than 90 day	vs after amendment file date)
Note: If the date inserted in this blue document's effective date on the Dep	ock does not meet the applicable partment of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board	d of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The nunficient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were appr must be separately provided for e	oved by the shareholders through ach voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
"The number of votes east for	or the amendment(s) was/were su	fficient for approval
by	(voting group)	,·*
selected, appointe	by an incorporator – if in the han I fiduciary by that fiduciary)	if directors or officers have not been ds of a receiver, trustee, or other court  Aprical A of person signing)
-	(Title of person signing)	