P21000081323

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S. ROBERTS
JUL 2 4 2023

COVER LETTER

TQ: Amendment Section Division of Corporations

: :

NAME OF CORPO	ORATION: JOJO MULTI-SER	VICES GROUP INC	
DOCUMENT NUM	P21000081323		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	LAMERCIE JOSAPHAT		
		Name of Contact Person	
		Firm/ Company	
	1548 NE 165TH STREET		
		Address	
	NORTH MIAMI BEACH, FI	L 33162	
		City/ State and Zip Code	e
	LAMERCIEJOSAPHATH@	GMAIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
LAMERCIE JOSA	PHAT	at (
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
■ \$35 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)
A D	lailing Address mendment Section ivision of Corporations O. Box 6327	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

JOJO MULTI-SERVICES GROUP INC	
(Name of Corporation	on as currently filed with the Florida Dept. of State)
P21000081323	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:
	The new
	orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable	<u></u>
(Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable:	:
(Mailing address MAY BE A POST OFFICE BO.	<u> </u>
	
D. If amending the registered agent and/or register	red office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	
Nume of New Kegistered Agent	
	(Floridu street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	tistered Agent: I am familiar with and accept the obligations of the position.
Siena	ature of New Registered Agent, if changing
•	y a managa mya maga a
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)

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 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)	Title	<u>Name</u>	Address
1) Change	SECT	ELVANETTE JOSAPHAT	465 NE 157TH TERRACE
X Add			NORTH MIAMI BEACH, FL 3316
Remove			
2) Change		_	
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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		- <u>-</u> -			
an amendment provides for an exch provisions for implementing the ame	ange, reclassificat	tion, or cancella	tion of issued s	shares,	
(if not applicable, indicate N/A)				_	
	-				· · ·

•

The date of each amendment(s) adoption date this document was signed.	ption:	, if other than th
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Depa	ck does not meet the applicable statutory filing requirement rtment of State's records.	ts, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the an cient for approval.	nendment(s)
	ved by the shareholders through voting groups. The following the voting group entitled to vote separately on the amendme	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	
MAY 4, 2023 Dated		
selected,	ctor, president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, or induciary by that fiduciary)	
L.	AMERCIE JOSAPHAT	
_	(Typed or printed name of person signing)	••
PI	RESIDENT	
_	(Title of person signing)	