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EXOTICS ENTERPRISES INC.

TYPE OF FILING: AMENDMENT

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Exotics Enterprise	s Inc.		
DOCUMENT NUME	D21000084667			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Piease return all corres	pondence concerning this ma	atter to the following:		
	Dominic Giovanniello			
•		Name of Contact Person	n	
	Work Share LLC			
		Firm/ Company		
	3288 Fifth Avenue, #412		·	
•	·	Address		
	San Diego, CA 92103			
•		City/ State and Zip Code	e	
	worksharello@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Dominic Giovanniello		858 81 (260-0596	
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	XI\$43.75 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 Tallahassee, FL 32314		Division of Corporations The Centre of Tallahassee		
		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation oſ

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P21000085667	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	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.A.	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)	
). If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent	
	نياس ھ
(Florida st	reet address)
1. 10. 10.2 3	,
New Registered Office Address:	(City) , Florida (Zip Code)
	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	
Signature of New h	Registered Agent, if changing

Exotics Enterprises Inc.

heck if applicable

1 The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(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 PT John Doe Y X Remove Mike Jones X Add <u>\$Y</u> Sally Smith (vpc of Action <u>Title</u> **Address** <u>Name</u> Check One) D Jaidee Capital, LLC 150 N.W. 36th Street Change Miami, FL 33127 Add Remove TCFO D 150 N.W. 36th Street Jeffrey Meng Change Miami, FL 33127 Add Remove P CEO S D James Cleiland 150 N.W. 36th Street) X Change Miami, FL 33127 Add Remove __ Change __ Add Remove Change ___ Add __ Remove __ Change Add

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:

Remove

mending or adding additiona ach additional sheets, if necessi	ary). (Be specific)			
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<u> </u>				
<u> </u>				
. <u> </u>				
				
				_ _
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				_
amendment provides for ar	ı exchange, reclassificati	on, or cancellation o	f issued shares.	
ovisions for implementing the (if not applicable, indicate N	<u>: amenoment it not cont</u> : /A)	alueo in the Amenon	ient itsen:	
(y nor approvable, maleure in	,			
				
				_
•				
				
				

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	October 20, 2021	
The date of eac date this docum	ch amendment(s) adoption:	, if other than th
Effective date j	if applicable:	
_	(no more than 90 days after amendment file date)	
	ate inserted in this block does not meet the applicable statutory filing requirements, this date ective date on the Department of State's records.	will not be listed as th
Adoption of Ar	mendment(s) (<u>CHECK ONE</u>)	
☐ The amendm action was no	nent(s) was/were adopted by the incorporators, or board of directors without shareholder action to required.	n and shareholder
	nent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) sholders was/were sufficient for approval.	ı
	ment(s) was/were approved by the shareholders through voting groups. The following statement arately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The n	number of votes cast for the amendment(s) was/were sufficient for approval	
b y	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
	October 22, 2021 Dated	
	Signature James Clelland	
	(By a directory president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	James Clelland	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	