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(((H21000399653 3)))



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Division of Corporations

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COVER LETTER

TO: Amendment Sec Division of Corp			
NAME OF CORPO	RATION: ULADAR, INC.		
	BER: P21000091313		
The enclosed Article.	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	DARYA VEPRZHYTSKAY	A	
		Name of Contact Person	
	ULADAR, INC.		
		Firm/ Company	
	500 THREE ISLANDS BLV	/D., STE 420	
		Address	
	HALLANDALE BEACH, F	L 33009	
		City/ State and Zip Code	
	darya,veprzhytskaya@gmi	ail.com	
	E-mail address: (to be us	ed for future annual report	notification)
For further informati	on concerning this matter, pleas		
DARYA VEPRZHY	YTSKAYA	at (dc & Daytime Telephone Number
Name	of Contact Person	Area Co	dc & 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	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ailing Address mendment Section	Amend	Address Iment Section

Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

		2021 SEC TALL
,	Articles of Amendment	
·	to	OCT AHA AHA
A	rticles of Incorporation	T 2
	of	E - 7
ULADAR, INC.		그의 글
(Name of Corporation	n as currently filed with the Florida Dept. of State)	C S TA
P21000091313		9: 5: ORID
(Docume	ent Number of Corporation (if known)	δ
Pursuant to the provisions of section 607.1006, Floridatits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the follow	wing amendment(s)
A. If amending name, enter the new name of the cou	poration:	
		The new
name must be distinguishable and contain the word "con" Inc.," or Co.," or the designation "Corp." "Inc," "chartered." "professional association." or the abbrev	rparation," "company," or "incorporated" or the abbrevior "Co". A professional corporation name must conviation "P.A."	ation "Corp.,") Hain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	<u>RESS</u>)	
	- <u>-</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 new registered agent and/or the new registered of	ed office address in Florida, enter the name of the office address:	
Name of New Registered Agent		
	(Florida street address)	İ
New Registered Office Address:	, Florida	
New Registered Office Madress.	(City)	Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	distered Agent: I am familiar with and accept the obligations of the positi	on.
		:
Sign	ature of New Registered Agent, if changing	
Check if applicable The emendment(c) is one being filled oursuant to s	607 0120 (11) (e) FS	

____ Remove

Address of each Officer: (Attach additional sheets, Please note the officer/did P = President; V = Vice Executive Officer; CFO = President, Treasurer, Dir Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	and/or D If necess ector titl President Chief Fi ector wo in the fo eves the c	pirector be sary) le by the fir i; T= Treas inancial Of uld be PTL llowing ma corporation	ing added: st letter of the office title: surer; S= Secretary; D= Director; TR= Moer. If an officer/director holds more the moner. Currently John Dow is listed as the Sally Smith is nomed the V and S. These	Trustee: C = Chairman or Clerk; CEO Chief on one title, list the first letter of each office held as should be noted as John Due, PT as a Change.
Example: X Change	<u>pt</u>	John Doe	:	
X Remove	<u>v</u>	Mike Jon	<u>es</u>	•
_X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addre</u> şs
1) X Change	P		DARYA VEPRZHYTSKAYA	500 THREE ISLANDS BLVD., STE 420
Add		_		HAULANDALE BEACH, FL 33009
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	<u> </u>			
Add				
Remove				
6) Change				
Add				

ttach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
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	t	on culturion of issued share	c .
f an amendment provides for an exc provisions for implementing the ame	endment if not contained in	the amendment itself:	<u>21</u>
(if not applicable, indicate N/A)	- Indiana in Maria Administra		
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		doption:	_, if other than th		
date this document v	_				
Effective date if ap	plicab <u>le</u> :	(no more than 90 days after amendment file date)			
		block does not meet the applicable statutory filing requirements, this date will expartment of State's records.	not be listed as the		
Adoption of Amend	iment(s)	(CHECK ONE)			
The amendment(lopted by the incorporators, or board of directors without shareholder action and	shareholder		
U The amendment() by the sharehold	s) was/were accers was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.			
☐ The amendment(must be separate	s) was/were aq ely provided fo	proved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	ĪĀ.		
	er of votes cas	it for the amendment(s) was/were sufficient for approval	ALLAHA ALLAHA		
by		(voling group)	SSEE,		
10/27/202 Dated		21	FLOR		
S	ignature	Darya Veprzhytskaya	AIL ORIDA		
-	(By a select	director, president or other officer—if directors or officers have not been ted, by an incorporator—if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)			
	DARYA VEPRZHYTSKAYA				
		(Typed or printed name of person signing)			
		PRESIDENT			
		(Title of person signing)			