P210000 95538

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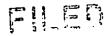


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Meticulous Detail	Inc				
DOCUMENT NUMBER: P21000095538						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corre	spondence concerning this ma	tter to the following:				
	Matthew A Calay					
	Name of Contact Person					
	Meticulous Detail Inc					
	Firm/ Company					
	15211 Tilwood Place					
	Address					
	Tampa ,Florida 33618					
		City/ State and Zip Code				
	mattcalay@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatio	n concerning this matter, pleas	se call:				
Matthew A Calay		at (_) 310-6440			
Name of Contact Person			de & Daytime Telephone Number			
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of



Meticulous Detail Inc	2021 DEC 10 AH 10: 48	
(Name of Corporation as current	ly filed with the Florida Dent of State)	
P21000095538	SECRETARY OF STATE	
(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) to	
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:	16418 North Florida Avenue	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Lutz, Florida 33549	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16418 North Florida Avenue	
	Lutz , Florida 33549	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres		
Name of New Registered Agent Matthew A Calay		
1521(Ti	Twood Place	
(Florida st	reet address)	
New Registered Office Address: IMMP a	(City), Florida 7356	
	(λη Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		
Matthew Ca	lay Registered Agent, if changing	
Signature of New I	Registered Agent, if changing	

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)

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>	Address	
1) Change	D	Matthew Calay	16418 North Florida Avenue	
<u></u> ∕∕⁄⁄ Add			Lutz,Florida 33549	
Remove				
2) Change		_		
Add				
Remove Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Attach	ading or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
dding off	cer/director
-	
	
If an a	nendment provides for an exchange, reclassification, or cancellation of issued shares,
provis	ions for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)
(9	пот привате, такие (чт)
	

,	12/01/21	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	01/21	
Effective date <u>if applicable</u> :		
	(no more than 90 days after t	amendment file date)
Note: If the date inserted in this document's effective date on the E		ry filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of dire	ctors without shareholder action and shareholder
■ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of ufficient for approval.	votes cast for the amendment(s)
	proved by the shareholders through voting reach voting group entitled to vote separate	
"The number of votes cas	t for the amendment(s) was/were sufficient	for approval
by/	(voting group)	"
12/01/21 Dated		
Signature	Matthew Calay	
(By a select	director, president or other officer – if directed, by an incorporator – if in the hands of a nted fiduciary by that fiduciary)	
	(Typed or printed name of pers	on signing)
	VP	
	(Title of person signing)	