## P21000096469

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## COVER LETTER

**TO:** Amendment Section

Division of Corporations
NAME OF CORPORATION: Jacksons Royal Incorporations DOCUMENT NUMBER: P210009164169
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jakem Jackson  Name of Contact Person  Jackson's Royal Incorporated  Firm/ Company  1403 Dunn Ave Sutte 2-355  Address  Jacksonville, FL 32218  City/ State and Zip Code  JayJoggwa gmail. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:  Tableton Tackson at 1904, 520-3843  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 \$\Bigcup \\$43.75 Filing Fee \& Certificate of Status \$\Bigcup \\$43.75 Filing Fee \& Certified Copy \$\Bigcup \\$52.50 Filing Fee \& Certified Copy \$\Bigcup \\$64dditional copy is enclosed)\$\$ (Additional Copy is enclosed)
Mailing Address Amendment Section  Street Address Amendment Section

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

## Articles of Amendment

to

Articles of Incorporation of

Jacksons Royal Inc	orporated
	by filed with the Florida Dept. of State)
P21000096469	
	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:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	21
C. Enter new mailing address, if applicable:	# In
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
D. If amending the registered agent and/or registered office add	lress in Florida, enter the name of the
new registered agent and/or the new registered office addres	
Name of New Registered Agent Jaheem	Tackson
Name of their registered light	
(Florida si	reet address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agen Thereby accept the appointment as registered agent. I am familiar	t:
Thereby accept the appointment as registered agent. Turn jamitan	with that accept the bonganous by the position.
0.60	un Ocalian
	m Jaclson Registered Agent, if changing
Signature of New	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)

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 = ChiefExecutive 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Khange	P	Jakeem Jackson	1403 Dunn Ave
Add			Suite 2-355
Remove			Jacksonville, FL 32218
2)Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

	(Be specific)			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	- Grand Annual Classical
(no more than 90 do	rys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or boar action was not required.	d of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	mber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vote	n voting groups. The following statement separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were s	ufficient for approval
by	
(voting group)	
Dated	<del></del>
Caho Da	R
Signature (By a director, president or other officer	if directors or officers have not been
selected, by an incorporator of in the ha	nds of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	_
Jakeem .	iackson
(Typed or printed name	e of person signing)
President	
(Title of person signin	g)

. . . .