P21000103394

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(5.11) - (5.11) - (1.11)
(Business Entity Name)
(Document Number)
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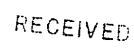
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Eastside Marketpla	ce. Inc.	
	er: <u>P21000/033</u>		
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
;	Scott B. Laurans		
-		Name of Contact Persor)
	Eastside Marketplace, Inc.		
-		Firm/ Company	
	100 Worth Avenue, Winthrop	House - 612	
-		Address	,
	Palm Beach, FL 33480		
	-	City/ State and Zip Code	
:	slaurans@slaurans.com		
-	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
Scott B. Laurans		at (965-3232
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	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)
Ame Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

2022 FEB - I AM 7:50 SECRETARY 183 TALLAHAL 183

January 6, 2022

SCOTT B. LAURANS EASTSIDE MARKETPLACE, INC. 100 WORTH AVENUE, WINTHROP HOUSE-612 PALM BEACH, FL 33480 US

SUBJECT: EASTSIDE MARKETPLACE, INC.

Ref. Number: P21000103394

We have received your document for EASTSIDE MARKETPLACE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L14000065114.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey OPS

Letter Number: 622A00000395

Articles of Amendment to Articles of Incorporation of

FILED

Eastside Marketplace, Inc.

2022 FEB - 1 AM 9: 01

		U1 3. 01
(Name	of Corporation as currentl	y filed with the Florida Dept; of State)
P21000103394		4114 3SF: 0035
1 = 1 = 2 0 0 0 0 0 0 0 0 0	(D	,
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607 ts Articles of Incorporation:	7.1006, Florida Statutes, this a	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new n	ame of the corporation:	
ESM II, Inc.		
name must be distinguishable and contai	COPP. Inc. or Co A	The new company," or "incorporated" or the abbreviation "Corp" professional corporation name must contain the word
B. Enter new principal office address,	if applicable.	N/A
Principal office address MUST BE A S	STREET ADDRESS)	
	·	
. Enter new mailing address, if appl (Mailing address MAY BE A POST	icable:	N/A
(Maning Buuress MAT BE A POST	<u>OFFICE BUX</u>)	
		_
. If amending the registered agent ar	nd/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the ne	w registered office address:	The state of the state of the
Name of New Registered Agent	N/A	
Hame of the w Registered Agent		
	 	
	(Florida stre	et address)
New Registered Office Address:	N/A	, Florida
	(City) (Zip Code)
		,,
ew Registered Agent's Signature, if c	hanging Registered Agent:	
hereby accept the appointment as regist	ered agent. I am familiar w	ith and accept the obligations of the position,
	Signature of New Re	gistered Agent, if changing
heck if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	<u>mes</u>	
X Add	<u>sv</u>	Sally Sr	mith_	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) N/A Change		_		
Add				
Remove				
2)Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		-		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary). /A	(Be specific)
-	
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares.
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclussification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) date this document was signed.	adoption: January 26, 2022 if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cu N/A	st for the amendment(s) was/were sufficient for approval
	(voting group)
Signature(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary) Scott B. Laurans
	(Typed or printed name of person signing)
	President
	(Title of person signing)