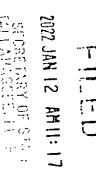
P21000104966

(Re	questor's Name)	
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- DA)	dress)	
(Cit	y/State/Zip/Phone	#)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
	4.10 ⁻⁰	
J. H	ORNE	
iAN	3 1 2022	
3.		
		

Office Use Only



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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: KB FACTORY OF	TILET ANDERSON INC		
	BER: P21000104966			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	THOMAS RENI			
		Name of Contact Person		
		Firm/ Company		
	6911 EAST ADAMO DRIVI	;		
		Address		
	TAMPA FL-33619			
		City/ State and Zip Code		
	thomas@kbfactoryoutlet.com	1		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
THOMAS RENI		at (352-238-0437) le & Daytime Telephone Number	
Name of Contact Person		Area Coo	le & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	rtment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) 106 Y OF STATE

FILED 2022 JAN 12 AMII: 18

KB FACTORY OUTLET ANDERSON INC

P21000104966		(* k , 1	- 2000-2011
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts	the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,	Corp." "Inc." or "Co". 🕢		abbreviation "Corp.,"
B. Enter new principal office address, (Principal office address MUST BE A S		N/A	
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
			
D. If amending the registered agent at new registered agent and/or the ne			<u>the</u>
	N/A	<u>·</u>	
Name of New Registered Agent			
	(Florida str	ant addrawer	
	N/A	evi aaaress)	
New Registered Office Address:		Flor <i>(City)</i>	ida (Zıp Code)
		· · · · · · · · ·	,
New Registered Agent's Signature, if c			*.*
I hereby accept the appointment as regis.	tered agent Lam Jamutar v	vith and accept the obligations of th	ве роѕиюн.
	Signature of New R	egistered 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.

X Change	<u>PT</u> <u>Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	MGR	THOMAS RENI	6911 E ADAMO DR
X Add			TAMPA, F1, 33619
Remove			
2) Change	MGR	PATEL, NARAYANI	51 VALLEBROOK CRESCENT
Add			CALEDON, ON L7C 4C5 CA
X Remove			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	wets, if necessary).	(Be specific)			
9/A					
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If an amendment p	orovides for an exch	iange, reclassifica	tion, or cancellat	ion of issued sha	res.
provisions for imp	olementing the ame	ndment if not cor	itained in the am	endment itself:	
	ble, indicate N/A)				
/ 1					
//N					
//N				····	
//N					
		<u>,</u>		· · · · · · · · · · · · · · · · · · ·	
		· · · · · · · · · · · · · · · · · · ·			
/A					
<i>I</i> A					

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The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date <u>if applicable</u> :	more than 90 days after amendment file date:
mo	more than 40 days after amenament fae dater
Note: If the date inserted in this block does not me document's effective date on the Department of State	eet the applicable statutory filing requirements, this date will not be listed as Es records.
Adoption of Amendment(s) (CHECK	(CONE)
The amendment(s) was/were adopted by the incoraction was not required.	porators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	cholders. The number of votes cast for the amendment(s) aval.
	reholders through voting groups. The following statement op entitled to vote separately on the amendment(s):
"The number of votes cast for the amendme	nt(s) was/were sufficient for approval
by N/A	<u>."</u>
(voting g	roup)
10 JA1 2 c	2.2
Signature (By a director, president	or other officer - if directors or officers have not been
selected, by an incorpor-	ator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by t DANY CHINTE	
(Type MGR	ed or printed name of person signing)
(Title	of person signing)

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