## P22000009623

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## **COVER LETTER**

Division of Corporations Online Products To Go Inc. NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: effrey Lopez Online Products To Go Inc. 23@aol.com For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee

Certified Copy

enclosed)

(Additional copy is

**Mailing Address** 

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Certificate of Status

Street Address

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

Certificate of Status

Certified Copy (Additional Copy

is enclosed)

## **Articles of Amendment**

to

	Articles of Incor	poration		<u>તું</u> છે.	
- I:	of	. 1		PEC PEC	71
Online	2 trody	CTS 10 G	io Inc	PR PR	
(Name of Corp	oration as currently (	filed with the Florida I	Dept. of State)	1000	1
P220	00009	1623		ST 2	TT
(D	Ocument Number of C	Corporation (if known)			
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this <i>Fl</i>	orida Profit Corporatio	n adopts the following	owing amending	gst(s) to
A. If amending name, enter the new name of	the corporation:				
1/14	7			Tri	
name must be distinguishable and contain the wor	d "corporation" "cor	mnany "or "incorporat	ed" or the abbre	The nev	
"Inc.," or Co.," or the designation "Corp,"	"Inc," or "Co". A j	professional corporation	n name must co	ontain the word	1
"chartered," "professional association," or the o	abbreviation "P.A."	١.			
B. Enter new principal office address, if appli	çable:	NA			
(Principal office address MUST BE A STREET					
			117		
C. Enter new mailing address, if applicable:		M .			
(Mailing address MAY BE A POST OFFIC	E BOX)	AIN		<del> </del>	
		<del></del>			
D. If amending the registered agent and/or re	gistered office addres	ss in Florida, enter the	name of the		
new registered agent and/or the new regist					
Name of New Registered Agent	NIA	+			
Name of New Neglisier ta rigem	11- <i>f</i> -	· <del>L</del>			
	(Florida street	t address )			
	(Piorida siree	,			
New Registered Office Address:	N	<i>P</i> Y	, Florida	<del>(7 </del>	
	(C	ity)		(Zip Code)	
Now Devictored Agent's Signature if shanging	Degistered Agents				
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		th and accept the obliga	tions of the posit	ion.	
	-				
	NIA	istered Agent, if changi	<u></u> .	<u>-</u>	
	Signature of New Reg	istered Agent, if changi	ng		

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 = 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>	John D	loc				
X Remove	Y	<u>Mike J</u>	<u>ones</u>				
X Add	<u>sv</u>	Sally S	<u>mith</u>				
Type of Action (Check One)	<u>Title</u>		Name			<u>Addres</u> s	
1) Change	VF	<b>&gt;</b>	Teffre	ey A. L	opez	18520 N.W. (	07thAve
Add				•		#188 Miami, FL 3	
Remove 2) Change		<del></del>		NA			<u></u>
Add							
Remove Change		<del></del>		ALA			<del>_</del>
Add							<del></del>
Remove				. 1.			
4) Change		<del>_</del>		ALA			
Add							<del></del>
Remove				Α.			
5) Change		_		NA			
Add							<del></del>
Remove				١ \			<del></del>
6) Change		_		NIA			
Add							
Remove							

	ets, if necessary).	les, enter change(: (Be specific)			
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<u>-</u>	ovides for an excha	inge, reclassification	on, or cancellation	of issued shares.	
an amendment pro	ementing the amen	dment if not conta	ined in the amend	ment itself:	
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an amendment pro rovisions for imple (if not applicable	e, indicate N/A)	١.			
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The date of each amendment(s) a	doption:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this blocument's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sh	areholder action and shareholder
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the officient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The folionaction each voting group entitled to vote separately on the amend	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u>,</u>	
· / <u></u>	(voting group)	
Dated 4 Signature (By a d selecte	rector, president of other officer if directors or officers had, by an incorporator – if in the hands of a receiver, trustee	nave not been
	ed fiduciary by that fiduciary)	•
	Teffrey Lopez (Typed or printed name of person signing)	
	President (Title of person signing)	<del></del>