P22000014158

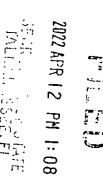
(Requestor's Name)	
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(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	
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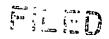
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: FORMEFORYOU	INC			
DOCUMENT NUM	BER: P22000014158				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	EVA MAE MAYLE				
	ronveronvor ave	Name of Contact Person	1		
	FORMEFORYOU INC				
	3325 BURDOCK AVE	Firm/ Company			
		Address			
	WEST MELBOURNE, FL 3:	2904			
		City/ State and Zip Code			
	FORMEFORYOUAMOVEMENT@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
EVA MAE MAYLE		at (de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	S43.75 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)		
An Div	niling Address nendment Section rision of Corporations	Amend Divisio	Address Iment Section of Corporations		
P.O. Box 6327 Tallahassee, FL 32314			entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



2022 APR 12 PM 1:08

FORMEFORYOU INC

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)	SIDIATE
P22000014158		0.660,	ole.FL
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
FOR ME FOR YOU INC			The new
	Corp." "Inc." or "Co".	"company," or "incorporated" or the abbreviati A professional corporation name must conta ."	ion "Corp.,"
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		•••	
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)		PO BOX 120071	
· · · · · · · · · · · · · · · · · · ·		MELBOURNE, FL 32912	
D. If amending the registered agent ar new registered agent and/or the new			
Name of New Registered Agent	MC CONSOLIDATED	SERVICES INCI DBA COOL WATERS ACCO	t
	2084 MEADOWLANE	AVE	_
	(Florida)	street address)	_
New Registered Office Address:	WEST MELBOURNE		
		(City) (Zip	Codej
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Ages tered agent. I am familia	at: v with and accept the obligations of the position.	
Yvett	ON CASUA Signature of New	oll, Resident Registered Agent, if changing	

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 Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
<u>X</u> Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	MGR		EVA MAE MAYLE	3325 BURDOCK AVE
X Add				WEST MELBOURNE, FL 32904
Remove				
2) Change		_		
Add				
Remove 3) Change		·		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attack	nding or adding additional Arti- additional sheets, if necessary).	APA enter change(s) nere:	
(Attach	aaaitionai sneets, ij necessary).	(ве ѕресіна)	
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16		and the same of th	10.22
nravi	mendment provides for an exch sions for implementing the ame	ange, reciassification, or cal	the amandment itself:
<u> projet</u> (i	f not applicable, indicate N/A)	iument ii not contained in t	the amendment usen.
*;	, , , , , , , , , , , , , , , , , , , ,		
			
			
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			-:
			

04/01/2022	
	, if other than
date this document was signed.	
04/01/2022	
Effective date <u>if applicable</u> :	
(no more man 90 days after amenament fue date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s).	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by'''	
(voting group)	
O4/01/2022 Dated Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
EVA MAE MAYLE	
(Typed or printed name of person signing)	
MANAGER	
(Title of person signing)	