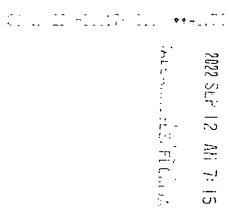
P22 000 017 200

(Requ	uestor's Name)	
(Addr	ess)	
(Addı	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nar	me)
(Doct	ument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	





800394204118



DEC 14 2022 S. PRATHE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: COMPLETELY PO	DLISHED INC.	
	BER: P22000017200		
The enclosed Articles	of Amendment and fee are sul	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Brooke Typer		
		Name of Contact Persor	1
	Entrepreneur Success, Inc.		
		Firm/ Company	
	4144 Ridge Road Unit 6		
		Address	<u>- :- · · · · · · · · · · · · · · · · · ·</u>
	Stevensville, MI 49127		
	10.00	City/ State and Zip Code	
	brooke@entsuccess.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	e call:	
Brooke Typer		at (269	357-7974
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	irtment of State:
□ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

	of	·
		## P
(Name of Corporation	as currently filed with the Florida Dept. o	of State)
COMPLETELY POLISHED INC.		of State)
(Docume	nt Number of Corporation (if known)	<u> </u>
Pursuant to the provisions of section 607.1006, Florida Sts Articles of Incorporation:	Statutes, this <i>Florida Profit Corporation</i> adop	ots the following amendment(s
A. If amending name, enter the new name of the cor	poration:	
		The new
name must he distinguishable and contain the word "corp" "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	or "Co". A professional corporation nam	the abbreviation "Corp.," ne must contain the word
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDR</u>	<u>VESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))	
		·
). If amending the registered agent and/or registere.	d office address in Florida, enter the name	of the
new registered agent and/or the new registered of		
new registered agent and/or the new registered of Name of New Registered Agent		
new registered agent and/or the new registered of		
new registered agent and/or the new registered of	(Florida street address)	
new registered agent and/or the new registered of	_	

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	PT	John Doe	
X Remove	<u>v</u>	Mike_Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
i) Change	P	Gacylan D. Blake	2208 Stillington St.
X Add			Orlando, FL 32835-5970
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			
 б) Change		_	
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
f an amendment provides for un exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	adment if not contained in the amendment itself:
(ij noi appricable, inalcale IVA)	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no i	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not meedocument's effective date on the Department of State'	et the applicable statutory filing requirements, this date will not be listed as the s records.
Adoption of Amendment(s) (CHECK	<u>ONE</u>)
The amendment(s) was/were adopted by the incorp action was not required.	orators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approve	rolders. The number of votes cast for the amendment(s)
"The number of votes cast for the amendmen	t(s) was/were sufficient for approval
09/02/2022 Dated	AN 7
Signature (By a director, president o selected, by an incorporat appointed fiduciary by the	r other officer – if directors or officers have not been or – if in the hands of a receiver, trustee, or other court at fiduciary)
Charles Dickson	
(Typed	or printed name of person signing)
Director	
(Title o	of person signing)