P22 000020312

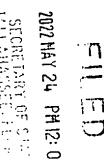
(Requestor's Name)			
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COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: Naked Diaho, Inc. DOCUMENT NUMBER: 2200020312				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Scott Warren Name of Contact Person Wellman & Warren LLP Firm/ Company Address Laguna Hills, CA, 92653 City/ State and Zip Code Subarren & W-Wlaw. Com E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Scott Women = 1,949,580 3737				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Street Address Amendment Section Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amo	endment	2022 SE TAL	
to Articles of Incor	poration	2 H	7
Naked Diablo"	ΤΩς·	17.24 17.555	
(Name of Corporation as currently P-2000 2 (Siled with the Florida Dept. of State)	PH 12:	5
(Document Number of C	lorporation (if known)	் ဥ	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the foll	lowing amendmen	ıt(s) to
A. If amending name, enter the new name of the corporation:	NIA	The new	
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A particular and a second control of the abbreviation "P.A."			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	/V/AT		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MA		
D. If amending the registered agent and/or registered office address: <u>Name of New Registered Agent</u>	ss in Florida, enter the name of the		
(Florida stree	t address)		
New Registered Office Address:(C		(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the posit	tion	
Signature of New Reg	istered Agent, if changing		

Check if applicable

 \square 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.

Example: X Change	PT John Doe	
X Remove	V Mike Jones	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One) 1) Change Add	Scott Warren	Address 24411 Ridge Route Suite 200
Remove 2) Change Add	V Lee Fitzpatrick	Laguna Hills, CA 92653 *Same as above &
Remove 3) Change		
Add Remove 4) Change Add		
Remove Change Add		
Remove 6) Change Add Remove		

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
The number of Shares for Naked Diabb In
1-
15 hereby increased from 10,000 shares to
1,000,000 Shares.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirement of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without s	shareholder action and shareholder
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the flicient for approval.	the amendment(s)
	roved by the shareholders through voting groups. The fa- each voting group entitled to vote separately on the ame	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
(By a d	rector, president or other officer – if directors or officers d, by an incorporator – if in the hands of a receiver, truste	
	ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	Incorportd - (Secretary) (Fitle of person signing)	