P22 000022110

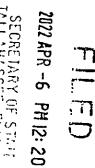
(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER-LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: HITS MANAGEM	ENT. INC.	. <u> </u>
DOCUMENT NUMB	ER:		
	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
	BERNARD A. SINGER, ESC	Q.	
-		Name of Contact Person	· · · · · · · · · · · · · · · · · · ·
	SINGER & ASSOCIATES		
-		Firm/ Company	
	16389 CABERNET DRIVE		
-		Address	
	DELRAY BEACH, FL 33440	6	
-		City/ State and Zip Code	2
	karenjsinger@gmail.com		
-	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, please.	954	985-8600
Name o	f Contact Person	at (at Coe	de & Daytime Telephone Number
Enclosed is a check for	the following amount made		
S35 Filing Fee	☐\$43.75 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)
Ame Divi: P.O.	ing Address indment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 Y	Address ment Section n of Corporations entre of Tallahassee S. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation

HITS MANAGEMENT, INC.	AM PR
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P22000022110	mo n
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	8958 West State Road 84, #154
(Principal office address MUST BE A STREET ADDRESS)	Davie, FL 33324
C. Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE ROY)	0050 N/ + C - D - L01 / 1254
	8958 West State Road 84, #154
(Mailing address MAY BE A POST OFFICE BOX)	Davie, FL 33324
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	Davie, FL 33324 Aress in Florida, enter the name of the
(Mailing address <u>MAY BE A POST OFFICE BOX</u>) D. <u>If amending the registered agent and/or registered office add</u>	Davie, FL 33324 Aress in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent	Davie, FL 33324 Iress in Florida, enter the name of the s:
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent	Davie, FL 33324 Aress in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent	Davie, FL 33324 Iress in Florida, enter the name of the s:

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.

\underline{X} Change	<u>PT</u> John	1 Doe					
X Remove	<u>V</u> <u>Mik</u>	Mike Jones					
X Add	<u>SV</u> <u>Sall</u>	y Smith					
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s				
1) X Change	T,R,q,d	MICHAEL O. PERLMAN	8958 West State Road 84, #154				
Add			Davie, F1. 33324				
Remove			2000 CHA LONDO CERDINA				
2) Change	V	JACOB PERLMAN	3200 SW 42ND STREET				
Add			FORT LAUDERDALE, FL 33312				
X Remove 3) Change	V	ZACHARY PERLMAN	3200 SW 42ND STREET				
Add			FORT LAUDERDALE, FL 33312				
X Remove	G	DDLIGE BEDLATAN	2200 CW (2ND CTREET				
4) Change	<u>S</u>	BRUCE PERLMAN	3200 SW 42ND STREET				
Add			FORT LAUDERDALE, FL 33312				
X Remove							
5) Change							
Add							
Remove							
6) Change							
Add							
Remove							

Attach aa	lditional shee	i <mark>g addition</mark> al ets, if necessar	y). (Be s	specific)				
				-				
			_			· -		
			_					
					. .			
provisio	ons for imple	ovides for an ementing the	<u>amendmer</u>	reciassinear it if not con-	tained in the	e amendmei	ssued snares, it itself:	
(if n	ot applicable	z, indicate N/A	i)					
								
							1. (1	

The date of each amendment(s) adoption:	, if other than the
date 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 block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	older action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes east for the am by the shareholders was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The followin must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by" (voting group)	
Dated MARCH 31, 2022 Signature X	
(By a director, president or other officer - if directors or officers have	
selected, by an incorporator – if in the hands of a receiver, trustee, or of appointed fiduciary by that fiduciary)	other court
MICHAEL O. PERLMAN	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)