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| PICK-UP WAIT MAIL | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

Division of Corporations NAME OF CORPORATION: OMB UNLIMITED CO. DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person OMB UNLIMITED CO. 4630 SAINT CROIX LN APT NADLES FL 34109 City/ State and Zip Code For further information concerning this matter, please call: DONALD BATZAT at 1239 357 - 9495

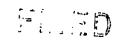
Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee ☐\$43.75 Filing Fee & ☐ \$35 Filing Fee □\$43.75 Filling Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Mailing Address Street Address

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

TO: Amendment Section

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

Articles of Amendment to Articles of Incorporation of



2022 JUH-9 PH 12: 31

| OMB UNLIMITED | CO, |
|--|---|
| (Name of Corporation as current) | y filed with the Florida Dept. of State) |
| P210000 24 | DUG ME . CLE. |
| (Document Number o | f Corporation (if known) |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| ONBUNLIMITED CO. | The new |
| name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". 2 "chartered," "professional association," or the abbreviation "P.A." | A professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | 95 SCOTCH PEBBLE DR. S'AINT JOHNS FL |
| | 32259 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 95 SCOCTH PEBBLE DR. |
| | SAINT JOHNS, FL |
| | 32259 |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address | ress in Florida, enter the name of the |
| Name of New Registered Agent | |
| (Florida s: | eet address) |
| | |
| New Registered Office Address: | (City) , Florida (Zip Code) |
| | |
| | |
| New Registered Agent's Signature, if changing Registered Agent | ti |
| Thereby accept the appointment as registered agent. I am jamiliar | with and accept the obligations of the position. |
| | |

Signature of New Registered Agent, if changing

Check if applicable

 $[\]Box$ 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: XChange | <u>PT</u> <u>Joi</u> | nii Doe | |
|-------------------------------|----------------------|-------------|-----------------|
| X Remove | <u>V</u> <u>Mi</u> | ke Jones | |
| X Add | <u>SV</u> <u>Sa</u> | ly Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 51 Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| f necessary). (Be | specific) | | | |
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| nicate 87A) | | | | |
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| | es for an exchange | es for an exchange, reclassification | es for an exchange, reclassification, or cancellation ting the amendment if not contained in the amen | es for an exchange, reclassification, or cancellation of issued shares ating the amendment itself: |

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| document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) | |
|---|-------------------------|
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wildocument's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) | |
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| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action an action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) | ill not be listed as th |
| action was not required. ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) | |
| | nd shareholder |
| 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) | |
| Dated 06-09-2022 | |
| 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) | |
| Typed or printed name of person signing) | |
| PRESIDENT | |