P22000033682

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S. ROBERTS AUG 0 2 2023

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: JULIEN BOURNI	VAL INC.				
DOCUMENT NUMB						
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	itter to the following:				
	JOSEF MYSOREWALA					
•		Name of Contact Person	1			
	LAW OFFICE OF JOSEF M MYSOREWALA PLLC					
•		Firm/ Company				
:	2000 S DIXIE HWY., STE. 1	12				
•		Address				
1	MIAMI, FLORIDA 33133					
•		City/ State and Zip Code	e			
	JOSEFM@LAWJMM.COM					
,		sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
JOSEF MY SOREWAI	LA	at (³⁰⁵	356-1031			
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Divis	ing Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations course of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

JULIEN BOURNIVAL INC.	
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P22000033682	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>:</u>
KINGSLEY CONSULTING INC.	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.	""company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	20
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	- 4
	,
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Mulling dames) <u>51741 D1, 74 FOOT OF FEEL 1974</u>	2.
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	ddress in Florida, enter the name of the ress:
Name of New Registered Agent	
(Florida	a street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	(City) Florida (Zip Code)
I hereby accept the appointment as registered agent. I am famili	ar with and accept the obligations of the position.
	I
Signature of Nev	w Registered Agent, if changing

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Т	JULIEN BOURNIVAL	3782 NW 85TH TERRACE
Add			PEMBROKE PINES, FL 33024
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	r adding additional . nal sheets, if necessar	y). (Be specific	?)			
						
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						•
an amendm	ent provides for an	exchange, reclas	sification, or car	<u>cellation of issu</u>	ed shares,	
<u>provisions fo</u>	r implementing the	amendment if no	ot contained in t	<u>he amendment i</u>	tself:	
(if not ap	olicable, indicate N/A	1)				
		-		······································	· · · ·	
···						
						
				-		

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	2/1/2023		
The date of each amendment(s) adoptio date this document was signed.	TOTAL		if other than the
Effective date if applicable:			_
	(no more than	90 days after omendment file date)	
Note: If the date inserted in this block didocument's effective date on the Department	oes not meet the app ent of State's records.	licable statutury filing requirements, this date wi	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted b action was not required.	y the incorporators, o	r board of directors without shareholder action an	d sharcholder
The amendment(s) was/were adopted by the shareholders was/were sufficient		The number of votes cast for the amendment(s)	
The amendment(s) was/were approved must be separately provided for each v	by the shareholders the oting group entitled to	hrough voting groups. The following statement to vote separately on the amendment(s):	
"The number of votes east for the	amendment(s) was/v	were sufficient for approval	
by		, 70	
-	(voting group)		
MAY 26, 2023 Dated		W	
Signature			
		ficer - if directors or officers have not been	
	a incorporator – if in i sciary by that fiduciar	the hands of a receiver, trustee, or other court	
appointes rec	war in the contraction of the co	3)	
VICK	Y BEDARD		
	(Typed or printe	d name of person signing)	
PRES	IDENT		
	(Title of person:	signing)	