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(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone #)			
PICK-UP				
(Business Entity Name)				
(Do	ocument Number)			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
	J. HORNE JUN - 9 2023			
	JUN 0			

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06/09/23--01001--002 **35.00



Office Use Only



COVER LETTER

TO: Amendment Section Division of Corporations

SKP Global, Inc NAME OF CORPORATION: PZZ*600*3 DOCUMENT NUMBER:

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:



E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Area Code & Daytime Telephone Number at (_______ . Nonan

Enclosed is a check for the following amount made payable to the Florida Department 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)

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

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

Ar	ticles of Amendi to	ment 👘 🖓		Ø	
Art	icles of Incorpor	ation			
SKP Global, Ir) U	2023 JUH -8	AH 8:58	5	
(Name of Corporation :	is currently filed	with the Florida	Dept. of Stat	le)	
P220003543				4	
(Document	Number of Corp	oration (if known)		,,	
Pursuant to the provisions of section 607,1006, Florida Sta its Articles of Incorporation:	itutes, this <i>Florid</i>	a Profit Corporatio	<i>m</i> adopts the	follov no pi lme	n.)
A. If amending name, enter the new name of the corpo	oration:				
SKP Global (\overline{C}			i s no	$\mathcal{Q}_{\mathcal{Q}}$
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviat	oration, ⁴ "compar • "Co", A profe	ny," or "incorporat essional corporatio	ted" or the al on name mu	bbreviation "Corp.,"	1
B. Enter new principal office address, if applicable:					
(Principal office address MUST BE A STREET ADDRE	<u>'SS</u>)	· · · ·	<u> </u>		
			<u> </u>		
	<u></u>				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)					
	· · · ·				
D. If amending the registered agent and/or registered new registered agent and/or the new registered office		Florida, enter the	name of the	3 	
Name of New Registered Agent	<u> </u>	<u></u> .			
	(Florida street add	ress)			
<u>New Registered Office Address</u> :	(City)	· · · · · · · · · · · · · · · · · · ·	Florida	(Zip Code)	
	- 1			-	
New Registered Agent's Signature, if changing Registe	red Agent:				
I hereby accept the appointment as registered agent. I an	i familiar with an	d accept the obliga	tions of the p	position.	

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

•		
•		
		•

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (Attach *additional sheets, if necessary).* (*Be specific*)

	_
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)	
(g nor approxime, indexite terr)	

· · ·

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 = ChiefExecutive 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 Y. 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: v m

<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			<u></u>
Remove			
2) Change			
Add			
Remove			
Add			
Remove			
4) Change			
Add			
Remove			, ,,, <u>,</u> ,
51 Change			
Add			
Remove			· · · · · · · · · · · · · · · · ·
6) Change	_ .		
Add			
Remove			,

The date of each amendment(s) adoption: ______, if other than the date this document was signed.

Effective date if applicable:

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 and shareholder action was not required.

- □ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) 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 u gʻi Ŷ 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) altensi karam President me of person signing) (Typed or printed if lister π^μl (Title of person signing)