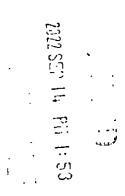
# P22000039937

(Requestor's Name)			
(Address)			
(Addless)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
wrong form 4085			
Office Use Only			



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06/14/22--01026--022 \*\*43.75



OCT 12 2022

D CUSHING

## COYER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Inter Comapny 7 I	nc	<u> </u>	_		
DOCUMENT NUME				_		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.				
Please return all corres	pondence concerning this ma	atter to the following:				
	Katharine Colangelo					
		Name of Contact Perso	n			
Inter Company 7 Inc						
	Firm/ Company					
	220 Sunrise Avenue Suite 20	)2				
		Address	<u> </u>	<del></del>		
	Palm Beach FL 33480			·		
		City/ State and Zip Cod	le	,		
esko	@eskohl.com					
	E-mail address:	(to be used for future annua	al report notification)			
For further information	n concerning this matter, plea	se call:		1		
Moira Bertrand		at (	899-1066  de & Daytime Telephone N			
Name of Contact Person		Area Co	ode & Daytime Telephone N	umber		
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State:			
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□S43.75 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		Street Address Amend	<u>:</u> dment Section			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



SEP 14 2.22

September 1, 2022

KATHARINE COLANGELO INTER COMPANY, INC 220 SUNRISE AVENUE, SUITE 202 PALM BEACH, FL 33480

SUBJECT: INTER COMPANY, INC Ref. Number: P22000039937

We have received your document for INTER COMPANY, INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have completed the wrong amendment form. Please complete the attached form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 722A00019569

561-899-1066

Moira Bertrand

www.sunbiz.org

Thank you very much for sending. We have a sinbiz account it additional funds are due IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

Date of this notice: 05-31-2022

Employer Identification Number:

88-2566478

Form: SS-4

Number of this notice: CP 575 A

INTER COMPANY 7 INC 220 SUNRISE AVE STE 202 PALM BEACH, FL 33480

For assistance you may call us at:

1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

#### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 88-2566478. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did **not** apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

Based on the information received from you or your representative, you must file the following forms by the dates shown.

Form 941 10/31/2022 Form 940 01/31/2023 Form 1120 04/15/2023

If you have questions about the forms or the due dates shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification (corporation, partnership, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2020-1, 2020-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election.

See Form 8832 and its instructions for additional information.

#### IMPORTANT INFORMATION FOR S CORPORATION ELECTION:

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S, U.S. Income Tax Return for an S Corporation, must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, Election by a Small Business Corporation.

### Articles of Amendment to Articles of Incorporation $\mathbf{of}$

Inter Company Inc	
(Name of Corporation as currently f	iled with the Florida Dept. of State)
P22000039937	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Inter Company 7, Inc	The new
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A proceeded to the contain of the abbreviation "P.A."	npany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable:	220 Sunrise Ava Stoszoz
(Principal office address MUST BE A STREET ADDRESS)	Palin Beach Fl. 3:3480
C. Enter new mailing address, if applicable:	₹ <u>.</u>
(Mailing address MAY BE A POST OFFICE BOX)	/
	• •
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
	<del></del>
(Florida street	address)
New Registered Office Address:	tty) (Zip Code)
(C	iţy) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.
Signature of New Reg	istered 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)

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.

X Change	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	<del></del>		
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
KCHIOVC			

E. If amending or adding additional Articles, enter change(s) here: (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)

The date of each amendment(s) adoption:	6-2-2022	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file data	<u>e)</u>
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) ( <u>C</u>	CHECK ONE)	
☐ The amendment(s) was/were adopted by the action was not required.	he incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	he shareholders. The number of votes east for the ar or approval.	mendment(s)
· · · · · · · · · · · · · · · · · · ·	the shareholders through voting groups. The following group entitled to vote separately on the amendment	<del>-</del>
"The number of votes cast for the an	nendment(s) was/were sufficient for approval	
by Inter Company	oting group)	
Dated 9-12-	-2022	
selected, by an in	esident or other officer – if directors or officers have accorporator – if in the hands of a receiver, trustee, or ary by that fiduciary)	
Kas	Colongelo (Typed or printed name of person signing)	
Pro	sident/Solo Sharehold (Title of person signing)	ler