P22000047526

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Dumbo of Colors I	Inc			
	MBER: P22000047526				
	es of Amendment and fee are su	abmitted for filing.			
Please return all cor	respondence concerning this ma	itter to the following:			
	Yaimarys Machado Avila				
		Name of Contact Person	n		
	Dumbo of Colors Inc				
		Firm/ Company			
	1901 Pauldo St				
	· · · · · · · · · · · · · · · · · · ·	Address			
	Fort Myers, FI 33916				
	City/ State and Zip Code				
	taxworldofswfl@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat	ion concerning this matter, plea	se call:			
Miriam Fernandez		at (<u>239</u>	677-4877		
Nan	e of Contact Person		de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

umber of Colors Inc

(Name of Co	rnoration as aurra	ntly filed with the Florida Dep	at of Ctatal
P22000047526	i por ation as curre.	ntiy med with the Fiorida Dep	ot. or state)
	(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	. Florida Statutes, th	is <i>Florida Profit Corporation</i> a	dopts the following amendment(s)
A. If amending name, enter the new name o	of the corporation:		
Dumbo of Colors Behavior Care Inc			The new
name must be distinguishable and contain the w "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or th	""Inc." or "Co".	A professional corporation i	
D. Estan many mains in all offices addresses if any	alianhla.	N/A	
B. Enter new principal office address, if app Principal office address <u>MUST BE A STREI</u>			-
		· · · · · · · · · · · · · · · · · · ·	262
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	1
	<u></u>		N C.1
D. If amending the registered agent and/or			me of the
new registered agent and/or the new regi		<u> 288:</u>	
Name of New Registered Agent N/A			
	(Florida	street address)	
New Registered Office Address:			_, Florida (Zip Code)

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)

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 Doc	<u>s</u>	
X Remove	<u>V</u>	Mike Jor	<u>ies</u>	
X Add	<u>sv</u>	Sally Sm	<u>iith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
l) Change		-		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				<u> </u>
5) Change		_		
Add				
Remove				
6) Change				
Add			 _	
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
E If an amondment regulder for an archange replacification of the District of the Laboratory	
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)	
N/A	

•

06/20/2023	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
06/20/2023	
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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder a action was not required.	action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
06/20/2023	
Dated	
Signature ×	
(By a director, president or other officer – if directors or officers have not be	en
selected, by an incorporator – if in the hands of a receiver, trustee, or other c	ourt
appointed fiduciary by that fiduciary)	
Yaimarys Machado Avila	
(Typed or printed name of person signing)	
President	
(Title of person signing)	