P22000049302

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | ATION: Pristine Assistance | Inc. | |
|---------------------------|--|--|---|
| DOCUMENT NUMBI | ER: P22000049302 | | |
| The enclosed Articles of | f Amendment and fee are su | bmitted for filing. | |
| Please return all corresp | ondence concerning this ma | tter to the following: | |
| Т | risa Kay Deodato | | |
| _ | | Name of Contact Perso | on. |
| P | ristine Assistance Inc. | rame of contact ferse | 311 |
| | | Firm/ Company | |
| 3 | 517 SW 25 Terrace | | |
| | | Address | |
| <u>N</u> | 1iami, FL 33133 | | |
| | | City/ State and Zip Co | de |
| n | niamitaxservices@aol.com | | |
| _ | E-mail address: (to be us | ed for future annual repor | rt notification) |
| For further information | concerning this matter, pleas | • | , |
| Trisa Kay Deodato | | at (| 984-7504 |
| Name of | Contact Person | Area C | ode & Daytime Telephone Number |
| Enclosed is a check for | the following amount made p | payable to the Florida Dep | partment of State: |
| S35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Amen Divisi P.O. E | ng Address dment Section on of Corporations Box 6327 assee, FL 32314 | Amen Divisi The C 2415 | t Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303 |

Articles of Amendment to Articles of Incorporation of

Pristine Assistance Inc.

| Florida Dept. of State) f known) Corporation adopts the following the | The | |
|--|-----------------------|--------------|
| Corporation adopts the follower that the second sec | The | |
| ucornorated" on the abbu- | The | |
| ncorporated" or the abbre corporation name must co | | |
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| . Florida | 3133 🔆 | |
| | enter the name of the | (S) |

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 | PT | John Do | <u>e</u> | |
|----------------------------|--------------|--------------|-------------------|--------------------|
| X Remove | <u>V</u> | Mike Jos | nes | |
| _X Add | <u>SV</u> | Sally Sn | <u>uith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | Address |
| l) X Change | P | _ | Trisa Kay Deodato | 3517 SW 25 Terrace |
| Add | | | | Miami, FL 33133 |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| Attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
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| an amendment provides for an eych | nange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer | endment if not contained in the amendment itself: |
| | The state of the s |
| (if not applicable, indicate N/A) | |
| (if not applicable, indicate N/A) | · · · · · · · · · · · · · · · · · · · |
| (if not applicable, indicate N/A) | |

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| The date of each amendment(s) adoptidate this document was signed. | 08/16/2022 ion: | , if other than the |
|---|---|---------------------|
| Č | | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block document's effective date on the Departr | does not meet the applicable statutory filing requirements, this date will be | ot be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ■ The amendment(s) was/were adopted action was not required. | by the incorporators, or board of directors without shareholder action and sh | areholder |
| ☐ The amendment(s) was/were adopted by the shareholders was/were sufficient | by the shareholders. The number of votes cast for the amendment(s) ent for approval. | |
| ☐ The amendment(s) was/were approved must be separately provided for each | d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast for th | ne amendment(s) was/were sufficient for approval | |
| by | • | |
| | (voting group) | |
| | | |
| selected, by | or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary) | |
| | TRISA KAY DEODA to | |
| | (Typed or printed name of person signing) | |
| | Dresident | |
| | (Title of person signing) | |