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(Ř	equestor's Name)	 ,
(A	ddress)	
(Ād	ddress)	-
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Dc	ocument 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 CORPORATION: Stally Todd Designs, Inc. DBA Eden Street Interiors
OCUMENT NUMBER: <u>P2200060107</u>
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Stacey
Name of Contact Person
Name of Contact Person Eden Street Interiors Firm/ Company
Firm Company
2600 N Rinerside Drive
Address
2600 N Rinerside Drive Address [n diglantic FL 32903 City/ State and Zip Code
City/ State and Zip Code
Stacy a edenstructinteriars. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stacey at (321) 298-0488 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number .
inclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Street Address

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

<u>ر</u>،

Articles of Amendment Articles of Incorporation \mathbf{of}

(Name of Corporation as currently filed with the Florida Dept. of State)

472000	050107			
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.100 ts Articles of Incorporation:	06, Florida Statutes, this Flo	oridu Profit Corporation	adopts the following amer	ndment(s) to
A. If amending name, enter the new name	e of the corporation:			
			The	new.
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Corp" "chartered," "professional association," or	o, " "Inc." or "Co". A p		d" or the abbreviation "Co	rp., "
3. Enter new principal office address, if a Principal office address <u>MUST BE A STR</u>				_
Enter new mailing address, if applical				
(Mailing address MAY BE A POST OF	<u>FICE BOX</u>)			<u>—</u>
			 	
). If amending the registered agent and/o	or registered office addres	ss in Florida, enter the r	name of the	
new registered agent and/or the new re	egistered office address:		(Same person	n but
Name of New Registered Agent	Stacey Todd	Abshir	(name chan	ged lege
<u>.</u>	Stacey Todd 2600 N Ri	reside Drine	Same person name chan due to n	iariage
V n	la dical cata		Florida 32903	
New Registered Office Address:	C	(ity)	Zip Code)	_
				-
New Registered Agent's Signature, if char hereby accept the appointment as registere		h and accept the obligati	ions of the position	: £
The state of the s	_	and accept the mining	on of the position.	
,	\wedge			

Signature of New 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.

Example:

X_Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name Mus	Address
1) Z Change	P	Stacey Todd Abshir	Same
Add		•	
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			· · ·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		···	
Remove			

Attach addition	al sheets, if necessary). (Be specific)
Name	Change of owner president due to marriage
Marri	age certificate and new the drivers license
atto	age certificate and new the drivers license iched (corpres).
Nam	e update to Stacey Todd Abshor from
S	tacey Lynn Kischner
F	
<u>provisions for</u>	ent provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself: licable, indicate N/A)
	·
_	

(marriage date)

December 31,2023 if other than the The date of each amendment(s) adoption: date this document was signed. 6-8-24 driws licence
(no more than 90 days after amendment file date) Effective date if applicable: 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) HI 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 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) (Typed or printed name of person signing) Presidut / Owner