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	Division of Cor	porations	
	Fax Number	: (850)617-6380	2022
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CODDOD STION.	OBFFS INCORPORATED
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DOCUMENT NUMBER:	P22000060950		 	

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

Please return all correspondence concerning this matter to the following:

Name of Contact Person	
Firm/ Company	
17350 STATE HWY 249 STE 220	2022
Address	12 DE
HOUSTON, TX 77064	EC C
City/ State and Zip Code	12
EFILE1234@INCFILE.COM	
E-mail address: (to be used for future annual report notification)	œ, `
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For further information concerning this matter, please call:

LOVETTE DOBSON	1 at (8884623453
Name of Contact Person	بر	area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

💻 835 Filling 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)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

The new

Articles of Amendment to Articles of Incorporation

of

OBFFS INCORPORATED

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

P22000060950

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

IT'S GLO INCORPORATED

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

	<u>Enter new principal office address, if applicable:</u> incipal office address <u>MUST BE A STREET ADDRESS</u>)	 	2012 DH	
		 		3 - 74
C.	<u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		AH 8: 1	, ii O
		 -		
D.	If amending the registered agent and/or registered office add new registered agent and/or the new registered office address			

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

(Zip Code)

___. Florida___

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. Tam tamiliar with and accept the obligations of the position.

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.

Example:

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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 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.

<u>X</u> Change	<u>PT</u> John D	<u>loc</u>	
X Remove	<u>V</u> <u>Mike J</u>	ones	
<u>X</u> Add	<u>SV Sally S</u>	mith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
L) Change			
Add			202
Remove			2022 DEC
2) Change	·· ·······		
Add			
Remove 3.) Change			
Add			
Remove			
4) Change			
Remove			
5) Change			
Add			
Remove			
6) Change	. <u></u>		
Add			
Remove			<u> </u>

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

Effective date <u>if applicable</u>:

(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)

- E The amendment(s) was were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- \square The amendment(s) was/were adopted by the shareholders The number of votes east for the amendment(s) by the shareholders was were sufficient for approval.
- \Box The amendment(s) was were approved by the shareholders through voting groups. The jollowing statement must be separately provided for each voting group entitled to vote separately on the amendment(s).

by			2022 DEI	; ² ;
	(voting group)		<u>-</u> C 12	4 U 1 19
	Dated	4	AH (, c]
	Signature <u>Effective Brocki</u> (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	-	8: 32	•
	appointed fiduciary by that fiduciary)			
	GLORIA BROOKS			

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)