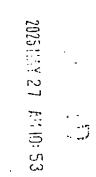
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

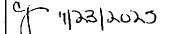


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05/27/25--01020--007 **35.00



Office Use Only



COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: KOSKI Corporation **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company DRRIUS E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KOSKI at (313) 316-6635

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$**43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation

,	of	-	•
Koski Coc	poration	5040	•
(Name of Corporat	ion as currently filed with the Flo	rida Dept. of State)	7 7 : 10: 53
7220000	111785		,
(Document)	ment Number of Corporation (if kno	own)	- 11 -
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	la Statutes, this Florida Profit Corp.	oration adopts the following a	mendment(s) to
A. If amending name, enter the new name of the c	orporation:		
		Ti	he new
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	" or "Co". A professional corp.	porated" or the abbreviation or the operation name must contain to	"Corp.," he word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	<u>e:</u> <u>DRESS</u>)		
			
	. <u>.</u> .		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
			
D. If amending the registered agent and/or registered new registered agent and/or the new registered	red office address in Florida, ente	er the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
· · · · · · · · · · · · · · · · · · ·	(City)	(Lip Code	e j
New Registered Agent's Signature, if changing Reg	aintana d. A. mana.		
hereby accept the appointment as registered agent.	<u>zistered Agent:</u> I am familiar with and accept the o	obligations of the position.	
C:	Johnson Oliver Desirement Commerce		
Sign	ature of New Registered Agent, if ch	rangi ng	

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	<u>PT</u>	<u>John Doe</u>			
X Remove	V	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	Name	٠	<u>Addres</u> s	
1) Change	CFO	Brento	on K. Robb	oins-Koski	H471 N, Federal Hw Dompano Bouch, Fr
Add Remove					Dompano Beach, Fr. 33064
2) Change					
Add					
Remove 3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

If amending or adding addition (Attach additional sheets, if nec	onal Articles, enter change(s) here: cessary). (Be specific)	
from Ko	Brenton K. Robbins-Koski Ski Corporation effective im	medicuti
rith Kosk	Rubbins-Koski has no affi i Corporation or liability March 1, 2024.	liation
All financia	8 CORECT W.3 01	6/22/2
	5/19/25 CEO	kj
an amendment provides for provisions for implementing to (if not applicable, indicate to the control of the con	an exchange, reclassification, or cancellation of issued shares, the amendment if not contained in the amendment itself: N/4)	

,			1	į.		
The date of each			5/19	2025	, if other th	an the
Effective date <u>if</u>	applicable:	51	19/205	25		
•			(no more than 90 de	nys after amendment file	date)	
Note: If the dat document's effect	e inserted in the	his block does no ne Department of	t meet the applicabl State's records.	e statutory filing requir	ements, this date will not be listed	as the
Adoption of Am	endment(s)	(<u>CH</u>)	ECK ONE)			
The amendme action was no	ent(s) was/wer t required.	e adopted by the i	ncorporators, or boa	rd of directors without s	hareholder action and shareholder	
☐ The amendme by the shareh	ent(s) was/wen olders was/we	c adopted by the s re sufficient for a	hareholders. The nupproval.	imber of votes cast for t	he amendment(s)	
☐ The amendme must be sepa.	ent(s) was/wen rately provided	e approved by the	shareholders throug group entitled to vote	h voting groups. The fa e separately on the ame	llowing statement adment(s):	
"The nu	mber of votes	cast for the amen	dment(s) was/were s	ufficient for approval		
by				,,		
		(votii	ng group)			
	Dated	(Sh)	5/19/2	5		
	Signature	Y	N	DXX: I	2ed	
	sel	a director, presidenced, by an incorpointed fiduciary	porator - if in the ha	if directors or officers ands of a receiver, truste	have not been e, or other court	
		E	lizabeth Typed or printed nam	K OS K	B. Rodriguez	
		(.	A - v	or person signing)		
			itle of person signin	e)		
		(.	and or horsom signin	b)		