# P22000062073

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DATE: 12/09/22

**NAME**: FAUX FLOWERS & S NAIL SUPPLIES, INC.

TYPE OF FILING: AMENDMENT

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**AUTHORIZATION: ABBIE/PAUL HODGE** 

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: FAUX FLOWER:	S & S NAIL SUPPLIES, IN	NC.
	1BER: P22000062073		
	es of Amendment and fee are si	abmitted for filing.	
Please return all corr	respondence concerning this ma	atter to the following:	
	Len Johnson		
	<del></del>	Name of Contact Perso	n
	Johnson & Associates Accou	inting LLC	
	<del></del>	Firm/ Company	
	3600 S State Rd 7, Suite 38	c many	
		Address	<u></u>
	Mlramar, FL 33023		
	-	City/ State and Zip Cod	e
	lmj@accountant.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
Len Johnson		305 at (	318-1007
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	illing Address condinent Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee l. Monroe Street, Suite 810

Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

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2022 DEC	-9	AH	9:	5,

FAUX FLOWERS & SINAIL SUPPLIES, INC.

257			<sup>1</sup> 9: 5n
( <u>Name c</u>	of Corporation as currentl	ly filed with the Florida Dept. of State)	<u> </u>
222000062073			•
	(Document Number o	f Corporation (if known)	·
tursuant to the provisions of section 607, s Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following an	nendment(
If amending name, enter the new na	ime of the corporation:		
	<del> </del>		е леж
idme must be distinguishable and contain "Inc.," or Co" or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co". 2	company," or "incorporated" or the abbreviation "( A professional corporation name must contain th ,	Corp.," ne word
B. Enter new principal office address,	if applicable:	SAME	
Principal office address <u>MUST BE A S</u>	TREET ADDRESS )		
. Enter new mailing address, if appli-		SAME	
(Mailing address MAY BE A POST (	OFFICE BOX)		
<ul> <li>If amending the registered agent and new registered agent and/or the new</li> </ul>			
	SAME	-	
W CW D L. L.	J/YIIII		
Name of New Registered Agent			
Name of New Registered Agent			
	(Florīda str	vet address)	
	(Florida stre SAME	eet address) Florida(City) (Zip Code)	

### 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>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change				 
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
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			
IVA	<u> </u>		
·			
	-		
F. Ifd and an income and an income an appealled	San of icenad charge		
F. If an amendment provides for an exchange, reclassification, or cancellar provisions for implementing the amendment if not contained in the am	endment itself:		
(if not applicable, indicate N/A)			
N/A			

date this document was signed.	doption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s)
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):  for the amendment(s) was/were sufficient for approval
	(voting group)
12/06/2022 Dated	
DatedSignature	Andring
DatedSignature(By a dir selected,	ector, president or other officer - If directors or officers have not been, by an incorporator - if in the hands of a receiver, trustee, or other court of fiduciary by that fiduciary)
Signature  (By a dir selected, appointe	by an incorporator – if in the hands of a receiver, trustee, or other access
Signature  (By a dir selected, appointe	d fiduciary by that fiduciary)