To:

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

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From:

Account Name : TAX ZONE INC.
Account Number : 120190000044
Phone : (407)888-3131
Fax Number : (888)453-0509

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Accountant a taxzonefican

COR AMND/RESTATE/CORRECT OR O/D RESIGN SILVIA STEWART PA

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Electronic Filing Menu

Corporate Filing Menu



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To:

COVER LETTER

TO: Amendment Ser Division of Cor						
NAME OF CORPO	RATION: SILVIA STEWAR	T PA				
	IBER: P22000065318					
	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	itter to the following:				
	ED KOTLER					
•		Name of Contact Perso	n			
	TAX ZONE INC					
		Firm/ Company				
	8865 COMMUNITY CIR					
		Address	······································			
	ORLANDO, FL 32819					
	City/ State and Zip Code					
	ACCOUNTANT@TAXZON	EFL.COM				
	E-mail address: (to be us	sed for future annual report	notification)			
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For further informati	on concerning this matter, plea	se call:				
ED KOTLER		at (407	888-3131		~	
Name	of Contact Person	Area Co	de & Daytime Telephone Nu	nber	707	
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Enclosed is a check I	or the following amount made	payable to the Florida Dep	artment of State:	:	2022 OCT 19	3 4
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)		19 AM 8:40	.T O
	illing Address	· 	Address			
	nendment Section		Iment Section			
	rision of Corporations D. Box 6327		on of Corporations entre of Tallahassee			
	lahassee, FL 32314		N. Monroe Street, Suite 810)		
1 41	The second series of the secon		assee, FL 32303			

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

To:

Articles of Amendment to Articles of Incorporation

SILVIA STEWART PA					
(Name	of Corporation as current	ly filed with the Florida Dept. of State)			
P22000065318					
	(Document Number (of Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following amen	dment(s) to		
A. If amending name, enter the new n	ame of the corporation:				
		The .	หลาย		
	Corp." "Inc," or "Co".	'company," or "incorporated" or the abbreviation "Cor A professional corporation name must contain the w	p., "		
B. Enter new principal office address,	if sonlicable:	923 SUMNER ST			
(Principal office address MUST BE AS		KISSIMMEE, FL 34741			
•					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE ROX)		923 SUMNER ST			
		KISSIMMEE, FL 34741			
D. If amending the registered agent ar new registered agent and/or the ner	nd/or registered office ado w registered office addres	ress in Florida, enter the name of the			
Name of New Registered Agent			202:		
	923 SUMNER ST		2022 ACT 1 9		
	(Fiorida st	reet address)	- "		
New Registered Office Address:	KISSIMMEE	, Florida 34741	ء م		
<u> </u>	. 1 12 11 11 11 11 11 11 11 11 11 11 11 1	(City) (Zip Code)			
New Registered Agent's Signature, if c I hereby accept the appointment as regist	haneing Registered Agen tered agent. I am familiar	t: with and accept the obligations of the position.	>		
· · · · · · · · · · · · · · · · · · ·	Signature of New I	Registered Ayent, if changing			

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 Doc 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 Aad.

Example:

X Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change	P	SILVIA STEWART	923 SUMNER ST
Add			KISSIMMEE, FL 34
Remove			
2) Change	·····		
Add			Action of the second of the se
Remove			
Add			
Remove			
4) Change			2022 OCT
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

To:

th additional sheets, if necess;	ary). (Be specific)				
					
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endment provides for a	n exchange, reclassificati	on, or cancellation (of issued shares,		
sions for implementing the indicate N. indicate N.	e amendment if not contr	nined in the amendr	nent itself:		
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				77	07 18 HJ 6

The date of each amendment(s) adoption: if other than the
date this document was signed.
Effective date if applicable: (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.
Adaption of Amendment(s) (CHECK ONE)
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
Signature (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)
(Title of person signing) 2022 OCT 19 AM 8: L

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