## P22000074400

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2022 OCT - 7 AM 8: 3!

CT 1/8/2023

## COVER LETTER

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TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: UNDER THE B	LUE SKY INC				
DCUMENT NUMBER:P22000074400					
The enclosed Articles of Amendment and fee are sub	mitted for filing.				
Please return all correspondence concerning this matter	er to the following:				
MARAV HEMO					
	Name of Contact Person				
UNDER THE BLUE	SKY INC				
	Firm/ Company				
3389 Sheridan	Street STE 185				
	Address				
HOLLYWOOD FL 33021					
	City/ State and Zip Code				
sharonsabc gmai	1.com				
E-mail address: (to be use	d for future annual report notification)				
For further information concerning this matter, please	call;				
Elinoar Rakhamimov	at () 657-5646				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State;				
S35 Filing Fee & S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)				
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				

## Articles of Amendment to Articles of Incorporation of

FILED

UNDER THE BLUE SKY INC

2022 OCT -7 AM 8: 35

(Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments Articles of Incorporation:  A. If amending name, enter the new name of the corporation:	(Name of Corporation	n as currently fi	iled with the Flor	ida Dept. of Sta	te)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new manner 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."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				<u>-</u>	SECKLINK OF S
If amending name, enter the new name of the corporation:  The new ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc.," or "Co". A professional corporation name must contain the word chartered, "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS.)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	(Docume	nt Number of C	orporation (if know	wn)	IMI
The new ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," lnc.," or "Co". A professional corporation name must contain the word chartered," "professional association," or the abbreviation "P.A."  Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS )  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	ursuant to the provisions of section 607.1006, Florida S Articles of Incorporation:	Statutes, this <i>Flo</i>	rida Profit Corpo	ration adopts th	e following amendment
ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," lnc.," or Co.," or the designation "Corp.," lnc," or "Co". A professional corporation name must contain the word chartered," "professional association," or the abbreviation "P.A."  Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS )  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	If amending name, enter the new name of the corp	poration:			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered address:	nc., or $Co.$ , or the designation "Corp." "Inc." (	or "Co". A n.	npany," or "incorp rofessional corpo	orated" or the a ration name m	Thenew hbreviation "Corp" ist contain the word
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDR	RESS )			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:			<del>-</del>		
new registered agent and/or the new registered office address:	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	) <u> </u>			
new registered agent and/or the new registered office address:		-			
Name of New Registered Agent	If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address Tice address:	in Florida, enter	the name of th	<u>e</u>
	Name of New Registered Agent				
(Florida street address)		(Florida street o	uldress)	_ <del>_</del>	
New Registered Office Address: Florida  (City) (Zip Code)	New Registered Office Address:	ıCit	·	, Florid	
	hereby accept the appointment as registered agent. I a	ım familiar with	and accept the ob	ligations of the	position.
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.					
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Signatu	re of New Revis	tered Agent, if che	inging	<u>.</u>

Check if applicable

<sup>☐</sup> 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)

Example:

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.

X Change	<u>b.t.</u>	<u>John Doe</u>	
X Remove	· <u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP/T	MARAV HEMO	3389 Sheridan St
Add			STE 185
Remove			Hollywood Fl 33021
2) Change		<u>.                                    </u>	
Add			
Remove 3) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
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5) Change			
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6) Change			
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	g necessary).	(пе ѕресіне)			
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<u>provisions for impleme</u>	nting the amen	nge, reclassificat	ion, or cancellation	on of issued shares.	
f an amendment provid provisions for impleme (if not applicable, in	nting the amen	nge, reclassificat dment if not cont	ion, or cancellation the ame	on of issued shares. adment itself:	
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f an amendment provid provisions for impleme (if not applicable, in	nting the amen	nge, reclassificat dment if not cont	ion, or cancellation the amer	on of issued shares.	

The date of each amendment(s) adoption: 9 27 2022.  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)
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
by
- Dated 10/1/2022
Signature Elizan Rakhamis
(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)
Elinoar Rakhamimov
(Typed or printed name of person signing)
OWNER - President
(Title of person signing)