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(((H23000257632 3)))



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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

: (323)389-0502 Fax Number

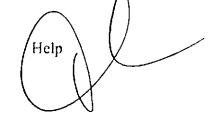
**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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COR AMND/RESTATE/CORRECT OR O/D RESIGN SAUCE X AGENCY INC.

| Certificate of Status | 0 |
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| Certified Copy | 1 |
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TO: Amendment Section

From; Leura Rodriguez

COVER LETTER

| Division of Corpo | rations | | | |
|--|---|--|--|--|
| NAME OF CORPOR | ATION: SAUCE X AGENC | CY INC. | | |
| DOCUMENT NUMB | | | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | | |
| Please return all corres | pondence concerning this ma | tter to the following: | | |
| | Cheyenne Moseley | | | |
| • | | Name of Contact Pe | rson | |
| LegalZoom.com, Inc. | | | | |
| Firm/ Company 101 N. Brand Blvd., 11th Floor | | | | |
| | | | | |
| | Glendale, CA 91203 | | | |
| • | | City/ State and Zip C | Code | |
| | | | | |
| | E-mail address: (to be us | sed for future annual rev | ont polification) | |
| | B 11211 BBB1 655. (10 50 10 | | | |
| For further information | concerning this matter, pleas | se call; | | |
| Cheyenne Moseley | | at (| 773-0888 ext. 9724 | |
| Name o | f Contact Person | Area | Code & Daytime Telephone Number | |
| Enclosed is a check for | the following amount made | payable to the Florida D | Department of State: | |
| S35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | E\$43.75 Filing Fee Certified Copy (Additional copy is enclosed) | & S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Am Div The 241 | eet Address endment Section ision of Corporations c Centre of Tallahassee 5 N. Monroe Street, Suite 810 lahassee, FL 32303 | |

From: Laura Rodriguez

Articles of Amendment Articles of Incorporation

| SAUCE X AGENCY INC. | | |
|---|---|------------------------|
| · · · · · · · · · · · · · · · · · · · | tly filed with the Florida Dept, of State) | |
| P22000091171 | | |
| (Document Number | of Corporation (if known) | |
| Pursuant to the provisions of section 607-1006, Florida Statutes, this its Articles of Incorporation: | : Florida Profit Corporation adopts the foll | lowing amendment(s) to |
| A. If amending name, enter the new name of the cornoration: | | |
| WINS ONLY Inc. | | The new |
| name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A. | A professional corporation name must co | viation "Corp.," |
| B. Enter new principal office address, if applicable; | 8274 Wildwood Lakes Drive | ۲.٥ |
| (Principal office address MUST BE A STREET ADDRESS) | Boca Raton, Fl. 33496 | |
| | | • |
| | | ٠ |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 8274 Wildwood Lakes Drive | |
| | Boca Raton, FL 33496 | |
| D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address | | |
| Name of New Registered Agent | | |
| | | |
| (Florida si | rect address) | |
| New Registered Office Address: | , Florida | · |
| | (City) | (Zip Code) |
| • | | |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar | t: with and accept the obligations of the posi- | tion. |
| | | |
| Signature of New I | Registered Agent, if changing | ··· · |
| | | |

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.

| X Change | <u>PT</u> | John Doe | | |
|-------------------------------|----------------------|--------------|---------------------------|---------------------|
| X Remove | \underline{V} | Mike Jones | | |
| X Add | <u>SV</u> | Sally Smith | 703 | r (/11¢ |
| Type of Action (Check One) | Title | Name | Address c | : : |
| 1) X Change | РТ | Dawn Schuman | 8274 Wildwood Lakes Dr | \ <u>``</u> |
| Add | | | Boca Raton, Florida 33496 | _: |
| Remove | (2.17) | rs (1.1 | | إد ر |
| 2) X Change | $\frac{\text{SD}}{}$ | Dawn Schuman | 8274 Wildwood Lakes Dr | |
| Add | | | Boca Raton, Florida 33496 | |
| Remove 3) Change | | | | _ |
| Add | | | | |
| Remove | | | | _ |
| 4) Change | | | | |
| Add | | | | _ |
| Remove | | | | _ |
| آر Change | | | | _ |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | _ |
| Add | | | | _ |
| Remove | | | | |

From: Laura Rodriguez

| , , , | cles, enter change(s) here: (Be specific) | |
|---|---|---------|
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| | | |
| f an amendment provides for an exch | ange, reclassification, or cancellation of issued shares, | |
| orovisions for implementing the amer (if not applicable, indicate N/A) | ndment if not contained in the amendment itself; | |
| provisions for implementing the amer | ndment if not contained in the amendment itself: | |
| provisions for implementing the amer | ndment if not contained in the amendment itself; | |
| provisions for implementing the amer | ndment if not contained in the amendment itself: | |
| provisions for implementing the amer | ndment if not contained in the amendment itself: | |
| provisions for implementing the amer | ndment if not contained in the amendment itself: | |

| 05/21/2023 | |
|--|---------------------|
| The date of each amendment(s) adoption: | , if other than the |
| 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 document's effective date on the Department of State's records. | ot be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shaction was not required. | areholder |
| ☐ 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 east for the amendment(s) was/were sufficient for approval | 20% |
| by | |
| (voting group) | |
| Dated JULY 10, 2023 | |
| Signature Deci Se | |
| (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) | |
| Dawn Schuman | |
| (Typed or printed name of person signing) | |
| President | |
| (Title of person signing) | |