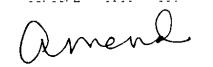
P22000094339

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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A PAMSEY

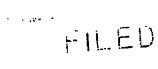
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Oskorp Inc				
	BER: P22000094339				
	s of Amendment and fee are sul	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Annette Jung				
	Name of Contact Person				
	AJ Global Management, LLC				
	Firm/ Company 5830 Copper Leaf Lane				
	Address				
Naples					
	•	City/ State and Zip Code	;		
	fsvmainz05@comcast.net				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
Annette Jung		at (2394551662	?)		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State;		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 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		Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



	<u> </u>
(Name of Corporation as currently	y filed with the Florida MentForestate) PM 12 56
P22000094339	STATE STATE
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this atts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	1 professional corporation name must contain the word
B. Enter new principal office address, if applicable:	3838 Tamiami Trail N # 416
(Principal office address MUST BE A STREET ADDRESS)	Naples, FL 34103
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3838 Tamiami Trail N # 416
	Naples, FL 34103
	Naples, FL 34103
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the
	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	ress in Florida, enter the name of the
new registered agent and/or the new registered office address Name of New Registered Agent	ress in Florida, enter the name of the
Name of New Registered Agent	ress in Florida, enter the name of the

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)

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Andreas Grasser	3838 Tamiami Trail N #416
<u>x</u> Add			Naples, FL 34103
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		_ -	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Pemove			

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
		
	 	
If an amendment provides for an ev	change, reclassification, or cancellation of issued shares,	
provisions for implementing the am (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
• •		
		,

The date of each amendment(s) add	ption: 08-01-2024	, if other than the
late this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, artment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes east for the amendicient for approval.	dment(s)
☐ The amendment(s) was/were appr must be separately provided for e	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment(s	statement s):
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated 08-05-2024	 	
Signature	mule sur	
	ector, president or other officer – if directors or officers have no by an incorporator – if in the hands of a receiver, trustee, or oth	
	d fiduciary by that fiduciary)	
,	Annette Jung	
-	(Typed or printed name of person signing)	
_	incorporator	
	(Title of person signing)	