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(Req	uestor's Name)	
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(City	/State/Zip/Phone	: #)
PICK-UP	MAIT	MAIL
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2023 JUN 16 PM 2:21
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A. RAMSEY
JUN 1 9 2023

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 - Tallahassee, Florida 32301 (850) 224-8870 - 1-800-342-8062 - Fax (850) 222-1222

		!		
AUDIT MONKEY IN	VC			
	 			
Please Debit FCA0000	00003 For: 35	;		
Thank you Seth Neele	y			
1.00				Art of Inc. File
Jordan John				LTD Partnership File
				·
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
,				Officer Search
	/			Fictitious Search
Signature		<u> </u>		Fictitious Owner Search
Signature				Vehicle Search
	- 			Driving Record
Requested by:	06/14/23			UCC or 3 File
				UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

Articles of Amendment

to Articles of Incorporation FILED

2023 JUN 16 AM 11: 41

(Name of Corporation as currently filed with the Florida Dept. of State) Tag

(Document Number of Corporation (if known)

ent(s) to

A. If amending name, enter the new name of the co	orporation:	
		The ne
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbre	" or "Co". A professional corp	porated" or the abbreviation "Corp.,
3. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADL</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
N. I. Comment and the second and the	and office address in Planta and	
		er the name of the
Name of New Registered Agent Name of New Registered Agent	office address:	
	office address:	
new registered agent and/or the new registered	office address: (Florida street address)	
new registered agent and/or the new registered Name of New Registered Agent	office address: (Florida street address)	
new registered agent and/or the new registered Name of New Registered Agent	office address: (Florido street address) (City) istered Agent:	Florida(Zip Code)
new registered agent and/or the new registered Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if changing Reg	office address: (Florido street address) (City) istered Agent:	Florida(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 Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	Miguel Paz	7402 HIBISCUS AVE
Add			BOKEELIA, FL 33922
X Remove			
2) X Change	CEO	Nicholas Mladucky	7402 HIBISCUS AVE
Add			BOKEELIA, FL 33922
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
(Attach additional sheets, if necessary). (Be specific)
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provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

	adoption:	, if other than th
date this document was signed. 00 Effective date <u>if applicable</u> :	/16/2023	
<u></u> -	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amosufficient for approval.	endment(s)
	oproved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
hy	.,,	
	(voting group)	
Dated	6/16/23 Vicholas Mladucky	
Signature	Vicholas Właducky	
(By a selec	director, president or other officer – if threctors or officers have red, by an incorporator – if in the hands of a receiver, trustee, or onted fiduciary by that fiduciary)	
	Nicholas Mladucky	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	