P23000008438

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TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: PURPLE BONES,	INCORPORATED		_		
DOCUMENT N	UMBER: P23000008438			-		
	icles of Amendment and fee are su	bmitted for filing.				
Please return all c	orrespondence concerning this ma	itter to the following:				
	DANIELLE, PRICE					
		Name of Contact Perso	n			
		Firm/ Company				
	12590 PINE BLVD, #260886	5				
		Address				
	PEMBROKE PINES, FLOR	IDA 33026				
		City/ State and Zip Cod	e			
	danielle.s.price@gmail.com					
	E-mail address: (to be us	sed for future annual report	notification)		20	
For further inform	nation concerning this matter, plea	se call:			2023 AUS -4	****
DANIELLE. PRI	CE	at (324-8025	-32:		1 1
Na	ame of Contact Person	Area Co	de & Daytime Telephone Nu	mber"	=×	
Enclosed is a chec	ck for the following amount made	payable to the Florida Dep	artment of State:		PM 12: 34	الاست. الاست
\$35 Filing Fe	e □ \$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)			

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

PURPLE BONES	. INCORPO	ORATED
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TORI EL BONES, INCORI ORATED	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P23000008438	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation: PURPLE BONES, INC.	77
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 contain the word
R Enter new principal office address if applicable:	12590 PINES BLVD, #260886
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	new principal office address, if applicable: I office address MUST BE A STREET ADDRESS PEMBROKE PIMES, FLORIDA 33026 T new mailing address, if applicable: 12590 PINES BLVD, #260886
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12590 PINES BLVD, #260886
failing address MAY BE A POST OFFICE BOX)	PEMBROKE PINES, FLORIDA 33026
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent	<u>-</u> ω
IF lorida si	reet address)
New Registered Office Address:	(City) , Florida
	(είγ) (είγ)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
Signature of New F	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)

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>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				- <u></u> -
Remove				
6) Change	-	<u> </u>		
Add				
Remove				

	ing or adding addition in additional sheets, if necessity if necessity in the contract of the	essary). (Be specif	ic)		
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 				<u> </u>	
f an ame	endment provides for	an exchange recla	ssification or canc	ellation of issued sha	TPS
<u>provisio</u>	ns for implementing	the amendment if n	ot contained in the	amendment itself:	1 1 1 1
(if ne	ot applicable, indicate	· N/A)			
					·
					

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The date of each amendment(s) a	02/01/2023 Instins	if other than t
t he date of each amenoment(s) as date this document was signed.	topuon:	, if other than t
•	1/2023	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this datapartment of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action	on and shareholder
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(fficient for approval.	s)
	roved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	,"	
	(voting group)	
07/26/2023		
Dated		
Signature	ANIFILE PRICE	
	rector, president or other officer - if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other cour	t
appoini	ed fiduciary by that fiduciary)	
	DANIELLE PRICE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	