## P23000009757

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(Address)
(City/State/Zip/Phone #)
(Stylesateralph Hollow)
PICK-UP WAIT MAIL
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(Document Number)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: OLY	- Row In	C
DOCUMENT NUMB	_		
The enclosed <i>Articles o</i>	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	Nou	( Etmich	
_		Name of Contact Perso	n
	(0,	ntro latino	Taxes 2 Services
_		Firm/ Company	<u> </u>
		n Poay Rd. NE	
_		Address	
	Valm B	City/ State and Zip Cod	o <b>5</b>
<del>-</del>		City/ State and Zip Cod	e
-	E-mail address: (to be us	Amail. Com Ed for future annual report	notification)
	is man address; (to be it.	ed for mare amain report	
For further information	concerning this matter, pleas	se call:	
	-		
Nou	1 Errajeb	ar (321	, 961-6038
	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	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)
	ng Address		Address
	idment Section		Iment Section
	ion of Corporations Box 6327		on of Corporations Tentre of Tallahassee
	nassee, FL 32314		N. Monroe Street, Suite 810
			assee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation

of

OLY - ROU	u Inc
	filed with the Florida Dept. of State)
P23000009	1757
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this $F$ its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	2
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	 
	<del></del>
C. Enter new mailing address, if applicable:	4575 Overlain Dr
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	-1323 OVERNITI DI
	Merritt Island, FL 32952
N 45	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent NOUL E	ttareh
Name of New Registered Agent	111 0.
(Florida stree	N   V(.
Havill 11	•
	and , Florida 32952 (Zip Code)
	<del></del>
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
N oil	•
11 or 4 to	(eb)
Signature of New Res	CAD gistered 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.

Example: X Change	<u>PT</u>	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>	Address
1) Change			 
Add			
Remove			
2) Change			 - <u></u> -
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	_		
Remove			
6) Change			
Add			
Remove			

(Attach additional s	ding additional Articles, hects, if necessary).— (Bo	? specific)			
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If an amendment i	orovides for an exchange	reclassification	or cancellation of	iccued charec	
provisions for imp	plementing the amendm	ent if not containe	d in the amendme	nt itself:	
(if not applica	ble, indicate N/A)				
	<del></del>				
				_	
				<u>.</u>	

. . . . . . . . .

The date of each amendment(s) addate this document was signed.	option:	, if other than the
date titis document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more man 10 days after amenament fue date)	
<b>Note:</b> If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ame flicient for approval.	endment(s)
	roved by the shareholders through voting groups. The followin each voting group entitled to vote separately on the amendmen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
Dated	108/2023 Nou Effaciel	
Signature	Mour Ettaceb	
(By a di	rector, president or other officer - if directors or officers have i	
	l, by an incorporator – if in the hands of a receiver, trustee, or o ed fiduciary by that fiduciary)	other court
прили		
	NOOV EHgieb  (Typed or printed name of person signing)	
•	(Typed or printed name of person signing)	<del></del>
	Pesklet.	
	(Title of person signing)	