## P23000014829

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SECRETARY OF STATE

2023 MAR 24 AM II: 50



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Go Inflatable Ente	rprises Inc				
DOCUMENT NUM	P23000014829					
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	respondence concerning this ma	tter to the following:				
	Deborah Busch					
	-	Name of Contact Perso	n			
	Go Inflatable Enterprise inc					
		Firm/ Company				
	7111 N. Main Street					
Address						
. Jacksonville, Florida 32208						
	. City/ State and Zip Code					
	goinflatableseterprises@gmail.com					
		sed for future annual report	notification)			
For further informati	on concerning this matter, plea	se call:		ARY OF		
Deborah Busch	-	904 at (	742-1908	STA E, FI		
Name	e of Contact Person	Area Co	) de & Daytime Telephone Num	iber m		
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:			
S35 Filing Fee	□\$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		Ameno Divisio The C	Address Iment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810			

Tallahassee, FL 32303

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## Articles of Amendment Articles of Incorporation of

Go Inflatable Enterprises inc	•		
	(Name of Corporation as current)	y filed with the Florida Dept. of State)	
P2300014829			
	(Document Number o	of Corporation (if known)	
		-	
Pursuant to the provisions of a its Articles of Incorporation:	section 607.1006, Florida Statutes, this	Florida Profit Corporation adopts the fo	llowing amendment(s)
A If a seed discussion and an	the new name of the corneration		
A. H amending name, enter	the new name of the corporation:		
			The new
"Inc.," or Co.," or the desi-	and contain the word "corporation," " ignation "Corp," "Inc," or "Co". ' ssociation," or the abbreviation "P.A."	company," or "incorporated" or the abbi A professional corporation name must 	eviation "Corp.," contain the word
B. Enter new principal office (Principal office address ML)	ce address, if applicable: IST BE A STREET ADDRESS		<del></del>
			<del></del>
C. Enter new mailing addr	ress, if appli <u>cable:</u> E A P <u>OST OFFICE BOX</u> )		2022 3.850
(Manning and Co.) (Manning and Co.)	<u> </u>		AR T
			32 24
			ARN OF S
		ress in Florida, enter the name of the	AMII: 50 OF STAT SSEE, FL
new registered agent and	d/or the new registered office address	<u>::</u>	: 5
Name of New Regist	ered Agent		O
	(Florida st	reet address)	
<u>New Registered Offic</u>	ce Address:	, Florida, Florida	(Zip Code)
		(Cnj)	(Eq. Colle)
NI IN IA A A CAN CIO		••	
New Registered Agent's Signature Agent's Signatu	nature, if changing Registered Agent ent as registered agent. I am familiar	<u>u</u> with and accept the obligations of the pos	sition.
_ <del>_</del>	Signature of New I	Registered Agent, if changing	

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607,0120 (11) (c), 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:

Remove

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	<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	Pres	Nick Phoenix	15767 Lexington Park Blvd
X Add			Jacksonville, Florida 32218
Remove			
2) Change	<del></del>	·	SEC
Add			CRED ALLIA
Remove 3) Change			SECRETARISSEE,
Add			E.F. S
Remove			ATE
4) Change			
Add			
Remove			
5) Change			
Add			<del></del>
Remove			
6) Change			
Add			

The date of each amendment(s) adop	3/15/2023 tion:	if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depar	k does not meet the applicable statutory filing requirements, this date will thent of State's records.	l not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareholder action and	l shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.	
	red by the shareholders through voting groups. The following statement the voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
officers of the corporation	••	
···	(voting group)	20 SI
3/15/2023	FALL	2023 MAR SECRETA
Dated		, T R ====
Signature	Wash Burch	T P
selected, b	tor, president or other officer – if directors or officers have not been y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	MAR 24 AHII: 50 CRETARY OF STATE
De	borah Busch	m
_	(Typed or printed name of person signing)	
	(Title of person signing)	