P2300034181

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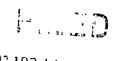
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: LIZZY 786 INC			
	BER: P23000024181			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	DOMINIC JOHN			
		Name of Contact Person	1	
	DJ&J ASSOCIATES INC			
	Firm/ Company			
	2300 SE 17TH ST, BLD 200			
		Address		
	OCALA, FL 34471			
		City/ State and Zip Code	•	
	dj_venad@yahoo.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For turther information	on concerning this matter, pleas		6942004	
	of Contact Person	at {	6942004 de & Daytime Telephone Number	
	or the following amount made			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Air Div P.C	iling Address endment Section rision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment to Articles of Incorporation of



177<u>V NC</u>

LIZZY 786 INC

2023 APR 11 AM 11: 03

(Name of Corporation	on as currently filed with the F	orida Dept. of State)	· · · JIJF
P23000024181		FENELLY . T.	ASSEE, FL
(Docum	nent Number of Corporation (if k	nown)	••
Pursuant to the provisions of section 607,1006, Florida is Articles of Incorporation:	a Statutes, this Florida Profit Con	poration adopts the follow	ing amendment(s
A. If amending name, enter the new name of the co	orporation:		
			Thenew
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 con		
3. Enter new principal office address, if applicable	<u> </u>		
Principal office address <u>MUST BE A STREET ADD</u>	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u>X</u>)		
	===	<u> </u>	
). If amending the registered agent and/or register	r <u>ed office address in Florida, er</u>	ter the name of the	
new registered agent and/or the new registered			
Name of New Registered Agent			
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zı _j	p Code)
ew Registered Agent's Signature, if changing Reg	istered Agent:	The or state and	
hereby accept the appointment as registered agent.	I am familiar with and accept the	e obugations of the position	1.
	tture of New Registered Agent, if	Changing	
Signo	шис ој њем кедімегей лугт, ц	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	$\overline{\mathrm{p_{T}}}$	<u>John Doe</u>		
X Remove	<u>V</u>	Mike Jon	<u>es</u>	
X Add	<u>SV</u>	Sally Smi	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>	<u> </u>	<u>Name</u>	Address
1) Change	Р		MADADALI LIZNA	8390 NW 17TH CIR
Add				OCALA, FL 34475
Remove 2) Change	P		LIZNA M DHARANI	8390 NW 17TH CIR
X Add				OCALA, FL 34475
Remove 3) Change		 -	<u></u>	
Add				
Remove				
4) Change				+-
Add				
Remove				
5) Change		 -		
Add				
Remove				
6) Change				
Add				
Remove				

	neets, if necessary). (Be specific)
•	
 -	
-	
· ·	
_	
<u> </u>	
f an <u>amendment p</u>	rovides for an exchange, reclassification, or cancellation of issued shares,
provisions for imp	lementing the amendment if not contained in the amendment itself:
(if not applica	ble, indicate N/A)

The date of each amendment(s) a	doption:	, if other than the
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 bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were add by the shareholders was/were se	opted by the shareholders. The number of votes east for the amendment of ficient for approval.	nt(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
04/04/2023 Dated	Ac Merain	
selecte	free tor, president or other officer — if directors or officers have not beed, by an incorporator — if in the hands of a receiver, trustee, or other edited fiduciary by that fiduciary)	
	LIZNA M DHARANI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	