P23000026053

(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: STROLL CONSUI	LTING INC.	
DOCUMENT NUM			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	FRED AMATO	·	
		Name of Contact Persor	
	FREDERICK AMATO		
		Firm/ Company	
	134 RUM RUNNER WAY		
		Address	· ·,··
	SAINT JOHNS FL 32259		
		City/ State and Zip Code	2
	DERFTRADER@GMIAL.C	ОМ	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
FRED AMATO	·		513-0959
Name	of Contact Person	at (Area Co) 513-0959 de & Daytime Telephone Number
Enclosed is a check for	or the following amount made		
S35 Filing Fee	☐S43.75 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		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



STROLL CONSULTING INC

(Name o	of Corporation as currently	y filed with the Florida Dept. of State) 🛞	<u> </u>
P23000026053		<u>්</u>	**************************************
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts the followi	ng amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
FA CONNECTIONS, INC.			The new
	Corp," "Inc," or "Co". A	company," or "incorporated" or the abbreviat professional corporation name must conto	tion "Corp.,"
B. Enter new principal office address,		NA	
(Principal office address <u>MUST BE A S</u>	IKEEI ADDKESS)		
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)		NA	
D. If amending the registered agent an new registered agent and/or the new			
Name of New Provision of Assess	NA		
Name of New Registered Agent			_
	(Florida str	not addunce)	
	NA (Fibrial Sir	eer auaress)	
New Registered Office Address:		, Florida	o Code)
		(7.4)	Coue
New Registered Agent's Signature, if c I hereby accept the appointment as regist		: with and accept the obligations of the position	
	Signature of Nov. D	egistered Agent, if changing	
	signature oj New K	egisterea Agent, () changing	
Charle 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	PT	John Do	oc	
-	-			
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>\$V</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	PT	_	FREDERICK AMATO	134 RUM RUNNER WAY
X Add				SAINT JOHNS FL 32259
Remove				*******
2) Change				
Add				
Remove Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach	nding or adding additional additional sheets, if necessar	ry). (Be specific)			
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	115-A****				
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	,		======		
If an a	mendment provides for an	exchange, reclassificatio	n, or cancellation of is	sued shares,	
<u>provi</u> s	sions for implementing the	amendment if not conta	ined in the amendmen	t itself:	
	f not applicable, indicate N/A	1)			
Α	 		·············		
-					
	· ·				
		-			
				···	

The date of each amendment		, if other than the
date this document was signed	3/2/2024	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/wei by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendere sufficient for approval.	lment(s)
	re approved by the shareholders through voting groups. The following sed for each voting group entitled to vote separately on the amendment(s	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
se	y a director, president or other officer – if directors or officers have not elected, by an incorporator – if in the hands of a receiver, trustee, or other oppointed fiduciary by that fiduciary) FREDERICK AMATO (Typed or printed name of person signing)	
	DIRECTOR/ PRESIDENT	
	(Title of person signing)	

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