## P23000043487

(Re	equestor's Name)	
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2024 NOV -8 PM 2: 28
TALLAHASSEE FLORIDA

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: KAIROS JAX JUIO	CES INC			
DOCUMENT NUMB	P23000043487				
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	RAUL PEREZ				
•		Name of Contact Person			
	KAIROS JAX JUICES INC				
•		Firm/ Company			
	13423 BEACH BLVD STE. 2				
•		Address			
	JACKSONVILLE, FL 32246				
-		City/ State and Zip Code			
	KAIROSHEALTHYFOOD@	GMAIL.COM			
-	E-mail address: (to be us	ed for future annual report r	notification)		
	concerning this matter, pleas				
RAUL PEREZ		at ( 904	) <u>609-1617                                    </u>		
Name o	f Contact Person	Area Cod	e & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depar	tment 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)		
Ame Divis P.O.	ing Address Indirect Section Issued of Corporations Box 6327 Ihassee, FL 32314	Division The Cer 2415 N	address nent Section of Corporations ntre of Tallahassee . Monroe Street, Suite 810 usee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

FILED

KAIROS JAX JUICES INC	2024 NOV - 9
(Name of Corporation as	2024 NOV -8 PM 2: 28
P23000043487	TALLAHASSEE FLURIDA
(Document N	umber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statuts Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ation:
	The new
name must be distinguishable and contain the word "corpora "Inc.," or Co.," or the designation "Corp," "Inc," or " "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word "P.A."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Gos wildness in Florida, onto the name of the
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
- (I <sup>*</sup>	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
lew Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f	amiliar with and accept the obligations of the position.
Signature (	of New Registered Agent, if changing

heck if applicable

1 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 Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	PAULA ALVAREZ	6145 LAKE TAHOE DR
Add X Remove			JACKSONVILLE, FL 32246
2) Change	Р	AUSTIN PEREZ	H0 RIALTO DR
Add			PONTE VEDRA, FL 32081
Remove 3) Change		<del>-</del>	
Add			
Remove			
l) Change		_	
Add			
Remove			
) Change			
Add			
Remove			
) Change			
Add			
Remove			

mending or adding additional Arti ach additional sheets, if necessary).	(Ru vnocific)
Ku adamonai sneets, y necessary).	(be specific)
	<del></del>
<del> </del>	
n amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate Nel)	endment if not contained in the amendment itself:
	<del></del>

.

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and s action was not required.	hareholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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	- 2
by	0024
by	<b>著</b> 可
Dated 15/31/24	FILED
Signature	ί,
Signature  (By defector, president or other officer – if directors or officers have not been = = = = = = = = = = = = = = = = = =	28
scledted, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
RAUL PEREZ	
(Typed or printed name of person signing)	<del></del>
VP	

(Title of person signing)