## P23000048293

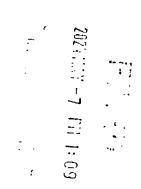
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| PICK-UP WAIT MAIL                       |
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04/02/24--01009--020 \*\*85.00



13

## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO   | RATION: Candles and Sh*t                    | INC·   |   |  |  |  |  |
|---|---|--|---|--|--|--|--|
| DOCUMENT NUM  | BER: P23000048293                           | <u></u>  |   |  |  |  |  |
| The enclosed Article.   | of Amendment and fee are su                 | bmitted for filing.  |   |  |  |  |  |
| Please return all corre   | espondence concerning this ma               | tter to the following:   |   |  |  |  |  |
|   | Katic Bell                                  |  |   |  |  |  |  |
|   | Name of Contact Person                      |  |   |  |  |  |  |
|   | Candles and Sh*t ENC.                       |  |   |  |  |  |  |
|   | Firm/ Company                               |  |   |  |  |  |  |
|   | 2218 Canton Ave                             |  |   |  |  |  |  |
|   |   | Address  |   |  |  |  |  |
|   | Alva, FL 33920                              |  |   |  |  |  |  |
|   |   | City/ State and Zip Cod  | le  |  |  |  |  |
|   | nthewickofit@gmail.com                      |  |   |  |  |  |  |
|   | E-mail address: (to be us                   | sed for future annual report                                     | t notification)   |  |  |  |  |
| For further information   | on concerning this matter, plea             | se call:   |   |  |  |  |  |
| Katie Bell  |   | at ( <u>239</u>  | 634-7666  |  |  |  |  |
| Name  | of Contact Person                           | Area Co  | ode & Daytime Telephone Number  |  |  |  |  |
| Enclosed is a check f   | or the following amount made                | payable to the Florida Dep                                       | partment of State:  |  |  |  |  |
| S35 Filing Fee  | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 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<br>Division<br>The C<br>2415                               | Address dinent Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 |  |  |  |  |

## Articles of Amendment Articles of Incorporation of

| •    |  |
|------|--|
| F    |  |
|      |  |
| 2024 |  |

Candles and Sh\*t Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P23000048293

|   | (Document Number         | of Corporation (if known)    |   |  |
|---|--------------------------|------------------------------|---|--|
| Pursuant to the provisions of section 607 its Articles of Incorporation:  |                          | •                            | adopts the following amendmen                                     |  |
| A. If amending name, enter the new n  | ame of the corporation:  |                              |   |  |
| In the Wick of it INC.  |                          |                              | <i>a</i>  |  |
| name must be distinguishable and contain<br>"Inc.," or Co.," or the designation "C<br>"chartered," "professional association, | Corp, " "Inc, " or "Co". | A professional corporation   | The new d' or the abbreviation "Corp.," and must contain the word |  |
| B. Enter new principal office address, if applicable:   |                          | N/A                          |   |  |
| (Principal office address <u>MUST BE A S</u>  |                          | N/A                          |   |  |
|   |                          | N/A                          |   |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                                       |                          | N/A                          |   |  |
|   |                          | N/A                          |   |  |
|   |                          | N/A                          |   |  |
| D. If amending the registered agent an new registered agent and/or the ne   |                          |                              | name of the   |  |
| Name of New Registered Agent  | N/A                      |                              |   |  |
|   | N/A                      |                              |   |  |
|   | (Florida :               | street address)              |   |  |
| New Registered Office Address:  | N/A                      |                              | , Florida N/A   |  |
|   |                          | (City)                       | (Zip Code)  |  |
| New Registered Agent's Signature, if of I hereby accept the appointment as regis  |                          | nt:                          | (Zip Code)  |  |
|   | Signature of New         | Registered Agent, if changin | g   |  |
|   |                          |                              |   |  |

Check if applicable

 $\square$  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 Do  | <u>c</u>    |   |                 |
|-------------------------------|-----------|----------|-------------|---|-----------------|
| X Remove                      | <u>V</u>  | Mike Jor | nes         |   |                 |
| X Add                         | <u>sv</u> | Sally Sn | <u>uith</u> |   |                 |
| Type of Action<br>(Check One) | Title     |          | Name        |   | <u>Addres</u> s |
| 1) Change                     |           | _        |             | _ | <u> </u>        |
| Add                           |           |          |             |   |                 |
| Remove                        |           |          |             | _ |                 |
| 2) Change                     |           | _        |             | _ | ·               |
| Add                           |           |          |             | - |                 |
| Remove 3) Change              |           | _        |             | _ |                 |
| Add                           |           |          |             | - |                 |
| Remove                        |           |          |             | _ |                 |
| 4) Change                     |           | _        |             | _ |                 |
| Add                           |           |          |             |   |                 |
| Remove                        |           |          |             | _ |                 |
| 5) Change                     |           | _        |             | _ |                 |
| Add                           |           |          |             | - |                 |
| Remove                        |           |          |             | _ |                 |
| δ) Change                     |           | _        |             | _ |                 |
| Add                           |           |          |             | _ |                 |
| Remove                        |           |          |             | • |                 |

| E. If amending or adding additional Artic | cles, enter change(s) here:                               |
|---|---|
| (Attach additional sheets, if necessary). | (Be specific)   |
| N/A                                       |   |
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| F. If an amendment provides for an exchi  | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer      | ndment if not contained in the amendment itself:          |
| (if not applicable, indicate N/A)         |   |
| N/A                                       |   |
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|  | 04/01/2024  |   |                           |
|--|---|---|---------------------------|
| The date of each amendment(s) ad   | option:   | ,,_,  | , if other than the       |
| date this document was signed.   |   | •   |                           |
| 04/01  | /2024   |   |                           |
| Effective date <u>if applicable</u> :                                      | (no more than 90  | days after amendment file date)   |                           |
| Note: If the date inserted in this blodocument's effective date on the Dep | ock does not meet the application artment of State's records. | able statutory filing requirements, this date   | will not be listed as the |
| Adoption of Amendment(s)   | (CHECK ONE)   |   |                           |
| ■ The amendment(s) was/were adopt action was not required.                 | oted by the incorporators, or b                               | oard of directors without shareholder action  | and shareholder           |
| ☐ The amendment(s) was/were adop<br>by the shareholders was/were suf       |   | number of votes cast for the amendment(s)   |                           |
|  |   | ough voting groups. The following statement of esparately on the amendment(s):              | ı                         |
| "The number of votes cast f  | or the amendment(s) was/wer                                   | e sufficient for approval   |                           |
| by   |   |   |                           |
| · · · · · · · · · · · · · · · · · · ·                                      | (voting group)  | ,   |                           |
| 03/28/2024<br>Dated  |   |   |                           |
| selected   |   | er – if directors or officers have not been<br>hands of a receiver, trustee, or other court |                           |
| 1  | Catie Bell  |   |                           |
| -  | (Typed or printed n   | name of person signing)   |                           |
| 1  | President   |   |                           |
| -  | (Title of person sig  | ning)   |                           |



April 21, 2024

KATIE BELL 2218 CANTON AVE ALVA, FL 33920

SUBJECT: CANDLES AND SH\*T INC.

Ref. Number: P23000048293

We have received your document for CANDLES AND SH\*T INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 624A00008658

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