## P23000055134

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06/11/24--01019--022 **\*\***35.00

S. PRATHER

## COVER LETTER

**TO:** Amendment Section Division of Corporations

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NAME OF CORPO	RATION: MAMA MERMAI	DE INC	
DOCUMENT NUM			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	HEATHER KAERCHER		
		Name of Contact Person	1
	MAMA MERMADE INC		
		Firm/ Company	74.4.4
	3006 TRUBS TRACE	, ,	
		Address	
	NEW SMYRNA BEACH, FI	L 32168	
		City/ State and Zip Code	e
	SEAHIPPIECO@OUTLOOI	C.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatic	on concerning this matter, plea	se call:	
HEATHER KAERCI	IER	at ( <sup>352</sup>	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, 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

А	to Articles of Incorporation	J.M.	2024
MAMA MERMADE INC	of		ب الله الله
(Name of Corporatio	on as currently filed with the Florida Dept. of State)	(1) (7) (*) -	
P23000055134		* 1	<b>=</b>
(Docume	ent Number of Corporation (if known)	5).	<del></del>
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the follo	wing amend	ment(s)
A. If amending name, enter the new name of the course SEA HIPPIE CO	rporation:	TI.	
	rporation," "company," or "incorporated" or the abbrev or "Co". A professional corporation name must co- viation "P.A."		)., "
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	N/A		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BON</u>	N/A		<del>-</del>
D. If amending the registered agent and/or registered new registered agent and/or the new registered o			-
Name of New Registered Agent			
<del></del>	(Florida street address)		
New Registered Office Address:	, Florida,	Zip Code)	-
	(Cuy)	z.ıp Coae)	
New Registered Agent's Signature, if changing Registered agent. If thereby accept the appointment as registered agent.	stered Agent: am familiar with and accept the obligations of the positi	on.	
Signal	ture of New Registered Agent, if changing	<del></del>	

## Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
1		
<del></del>		
namendment provides for an excha	ange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	

•

<b>771</b>	06/05/2024	
The date of each amendment(s) adopti date this document was signed.	on:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block document's effective date on the Departr	does not meet the applicable statutory filing requirements, this date wil nent of State's records.	l not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder action and	l shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	202
	e amendment(s) was/were sufficient for approval	2024 JUNITE ANTIGEGY ALLEGNASSEL PLESSE
by	(voting group)	535
Dated		974 G
Signature		÷.' €
(By a directo selected, by	n, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)	_
HEA	THER KAERCHER	
<del></del>	(Typed or printed name of person signing)	
P		
-	(Title of person signing)	

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