

## P23000061915

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## COVER LETTER

TO: Amendment Section Division of Corporations

TAME OF CORPORATION: The Wet Kit INC	
OCUMENT NUMBER: 723000061915	
he enclosed Articles of Amendment and fee are submitted for filing.	
lease return all correspondence concerning this matter to the following:	
Alexis COLON Name of Contact Person	
the wet kit INC Firm Company	
2920 NW 63rd 5t	
Mi ami FL 33147 City/ State and Zip Code	
Lexcolon a taloud com  E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
Alexis Colon at (786) 348-7157  Name of Contact Person Area Code & Daytime Telephone Number	
nelosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Status   S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status   Certified Copy (Additional copy is enclosed)   Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

The Wet Kit INC	2023 SEP 21 AM 11: 01
(Name of Corporation as currently filed	with the Florida Dept. of State)
<u> 123000061915</u>	$-\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}$
(Document Number of Corpo	Pration (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	<b>↓</b>
name must be distinguishable and contain the word "corporation," compan "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A profe. "chartered," "professional association," or the abbreviation "P.A."	The new y," or "incorporated" or the abbreviation "Corp.," ssional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Fnew registered agent and/or the new registered office address:	Torida, enter the name of the
Name of New Registered Agent Agent	
(Florida street addre	58)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent.—I am familiar with and t	necept the obligations of the position.
Signature of New Registered	Agent, if 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)

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 Joh	<u>n Doe</u>	
X Remove	<u>V</u> <u>Mii</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	l <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addreg</u> s
1) Change	DiR	Alexis Colon	2920 NW 63rd5+
Add			mia FL 33147
<u> </u>			<del></del>
2) Change	TRE	Alexis colon	2920 NW 63rd St
Add			mia FL 33147
Remove Change	<u>sec</u>	Alexis Colon	2920 NW 63805+
Add			mia FL 33147
<u> </u>			
4) Change	NP	Alexis Colon	2920 NW 631251
Add			mia fl 33147
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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If an amendment	provides for an exchange, reclassification, or cancellation of issued shares.	
provisions for im	provides for an exchange, reclassification, or cancellation of issued shares, uplementing the amendment if not contained in the amendment itself:	
(if not applied	able, indicate N/A)	
	M-/	

The date of each amendment(s) adoption: $9 - 18 - 23$ , if other than the date this document was signed.
Effective date if applicables 9 - 18 - 23
(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 not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ 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
by
(voting group)
Dated $9-18-23$ Signature $23$
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
President
(Title of person signing)