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Division of Corporations

Fax Number : (850)617-6380

From:

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Account Number : I20230000182 : (321)215-1310 Fax Number : (856)956-1099

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN **OCEAN MOON INC**

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COYER LETTER

RATION: OCEAN MOON IN	NC	
of Amendment and fee are sui	bmitted for filing.	
spondence concerning this ma	tter to the following:	
JOHN M ISMAIL		
	Name of Contact Person	1
OCEAN MOON INC		
	Firm/ Company	
129 N Courtenay Pkwy	• •	
	Address	<del></del>
Menitt Island, FL 32953		
	City/ State and Zip Cod	e
johnmismail@gmail.com		
E-mail address: (to be us	sed for future annual report	notification)
on concerning this matter, pleas	se call:	
	at (407	473-3229
of Contact Person	Area Co	de & Daytime Telephone Number
or the following amount made	payable to the Florida Dep	artment of State:
□\$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)
endment Section rision of Corporations ). Box 6327	Ameno Divisio The C	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303
	BER: P23000067535  s of Amendment and fee are suitespondence concerning this matter.  JOHN M ISMAIL  OCEAN MOON INC  129 N Courtenay Pkwy  Menitt Island, FL 32953  johnmismail@gmail.com  E-mail address: (to be used to concerning this matter, please on concerning this matter, please of Contact Person for the following amount made  \$43.75 Filing Fee &	RATION:  OCEAN MOON INC  BER:  P23000067535  To f Amendment and fee are submitted for filing.  Payondence concerning this matter to the following:  JOHN M ISMAIL  Name of Contact Person  OCEAN MOON INC  Firm/ Company  129 N Courtenay Pkwy  Address  Memitt Island, FL 32953  City/ State and Zip Cod  johnmismail@gmail.com  E-mail address: (to be used for future annual report on concerning this matter, please call:  at (407  Area Co  or the following amount made payable to the Florida Dep  S43.75 Filing Fee & S43.75 Filing Fee &  Certificate of Status  Certified Copy (Additional copy is enclosed)  stilling Address tendment Section  Wision of Corporations Division D

## Articles of Amendment to Articles of Incorporation

(Name of C) P23000067535	orporation as currer	itly filed with the Florida Dept. of S	itate)
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 100		,	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	o, Florida Statutes, in	is Florida Profit Corporation adopts	the following amendment(s)
A. If amending name, enter the new name	of the corporation:		
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Corp "chartered," "professional association," or the contains the	" "Inc " or "Co"	4 professional components where	The new abbreviation "Corp.," must contain the word
B. Enter new principal office address, if applicable:		129 N Courtenay Pkwy	SE S
(Principal office address MUST BE A STRE	SET ADDRESS )	Merrin Island, FL 32953	S
			777
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		129 N Courtenay Pkwy	6: 52
		Merritt Island, FL 32953	
			•
D. If amending the registered agent and/or new registered agent and/or the new rej	registered office ad gistered office addre	dress in Florida, enter the name of	the
	OHN M ISMAIL		
129	N Courtenay Pkwy		<del></del> _
		ireet address)	<del></del>
New Registered Office Address: Me	rritt Island	, Flori	dada
		(City)	(Zip Code)

Check if applicable

<sup>☐</sup> 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	YATING ZHAO	129 N Courtenay Pkwy
Add			Merrin Island, FL 32953
Remove 2) Change	P	JOHN M ISMAIL	129 N Courtenay Pkwy
x Add			Merritt Island, FL 32953
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<del> </del>
5) Change			
Ádđ			
Remove			
6) Change			
Adđ			
Remove			

<u></u>	amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific)
	the specyn.
_	
	<u></u>
_	
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٠.	Not an efficiency above
Ц	an amendment provides for an exchange, reclassification, or concellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
4	(if not applicable, indicate N/A)
_	
-	

....

The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	······································
Note: If the date inserted in this bl document's effective date on the De	lock does not meet the applicable statutory filing requirements, this opartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder ac	tion and shareholder
The amendment(s) was/were ado by the shareholders was/were su:	pted by the shareholders. The number of votes cast for the amendmen flictent for approval.	t(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
0 <b>9</b> /15/2024 Dated		
Signature	En MISMA"	
(By a dii selected	rector, president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other coned fiduciary by that fiduciary)	urt .
;	JOHN M ISMAIL	
-	(Typed or printed name of person signing)	
1	PRESIDENT	
-	(Title of person signing)	<del></del>