Morida Department of State Design of Corporations Electronic Filing Cover Sheet

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Ema11	Address:	

COR AMND/RESTATE/CORRECT OR O/D RESIGN MOMMIES CAKES & MORE, INC.

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A. RAMSEY

Electronic Filing Menu

Corporate Filing Menu APR 10. 2024

Help

2024 AFR -9 FH 2: 50

FILED

Articles of Amendment to Articles of Incorporation

2024 APR -9 PM 1: 00

DECRETARY OF STATE

MOMMIES CAKES & MORE, INC.	i saudd African
(Name of Corporation as curre P23000069092	ently filed with the Florida Dept. of State)
(Document Numbe	er of Corporation (if known)
	his Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
COOKIECRAFTERS, INC.	201
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.:	4 professional cornoration name must sometime to a con-
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
,	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	dress in Florida, enter the name of the
Traine Of the A Register of Agont	
(Florida 3	tree: address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agentereby accept the appointment as registered agent. I am familiar	nt: with and accept the obligations of the position.
Signature of New i	Registered Agent, if changing
heck if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	· · · · · · · · · · · · · · · · · · ·

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:

Theore The PT The Power PT The Pt The

∆_Cnange	PT	John D	<u>pe</u>									
X Remove	$\cdot^{\underline{\mathbf{V}}}$	Mike J	ones				•			•		
X Add	<u>sv</u>	Sally S	mith									
Type of Action (Check One)	<u>Title</u>		<u>Name</u>						<u>Addres</u> s			
l)Change		_	N/A			_		_	_			
Add								•				
Remove												
2) Change	-	_						<u>.</u>				
Add												
Remove 3) Change		_		·- ·								
Add												
Remove												
4) Change	<u> </u>	_ ·				·· <u>-</u>					· 	·
Add					•				<u>.</u>	· ·		
Remove						·	•	-				
5) Change		-						_				
Add								-				
Remove								_				
6) Change			·			-		-			<u></u>	
								-				
Remove								_	·	<u> </u>		

F. If amend	ing or adding addi	tional Austria				
(Attach au	ing or adding addit lditional sheets, if no	cessary). (Be	enter change(5) h especific)	ere:		
N/A			.			
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F. If an amen	dment provides for	on erchange	vacinesifiantian	cancellation of issu		
Dr o r 1310 H3	for implementing applicable, indicate	THE DIMENSIME	t If not contained	in the amendment i	ed snares, self:	
N/A	аррисиоте, таксат	(NA)				
						
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	If other
Effective date Hapolicable:	
" chiattai wii ta iii i	(no more than 90 dors offer amendment flie date)
Note: If the date insured in the date on the	his block does not breek the applicable statutory filing requirements. This deter will not be listen bepartment of State's records
Adoption of Amendment()	(CHECK ONE)
O The amendment(s) was wen action was not required.	e adopted by the incorporators, or board of directors without shareholder section and shareholder.
The amendment(s) was/wen by the shareholders was/we	e adopted by the shareholders. The mumber of votes cast for the amendment(s)
	e approved by the shateholders through voting groups. The following statement
	d for each voting group entitled to your separately on the amendment(s): (cast for the amendment(s) was/were sufficient for approval (woung group)
The mumber of votes	cast for the smendment(s) was were sufficient for approval.
by APRIL Doted Signature	cast for the amendment(s) was/we're sufficient for approval (voding group)
by APRIL Dated Signature (By	cast for the amendment(s) was/were sufficient for approval.
by APRIL Dated Signature (By	cast for the amendment(s) was/were sufficient for approval (voding group) 02, 2024 a director, president of other officer—if directors or officers have not been sented, by an incorporator—If in the hands of an exception for other points.

ATTENDED OF THE

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