## PA30007-47-32

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 8, 2023

LUIS EMILIO GOMEZ 2688 CABOT ST #7 BEVERLY, MA 01915

SUBJECT: CLUTCH GENE, INC. Ref. Number: P23000074732

We have received your document for CLUTCH GENE, 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):

Please ensure that you check one of the adoption of amendment boxes.

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.

Morgan E Lovett Regulatory Specialist II

Letter Number: 923A00026018

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: CLUTCH GENE.	INC.				
DOCUMENT NUM	ABER: P23000074732	<u></u>				
	es of Amendment and fee are so	ibmitted for filing.				
Please return all cor	respondence concerning this ma	atter to the following:				
	LUIS EMILIO GOMEZ					
	Name of Contact Person					
	Firm/ Company					
	268B CABOT ST #7					
	Address					
	BEVERLY, MA 01915 UN					
		City/ State and Zip Coo	le			
	julianakartitsas@gmail.com					
	E-mail address: (to be us	sed for future annual repor	t notification)			
For further informat	ion concerning this matter, plea	se call:at ( \$\frac{321}{2} \)	436-5110			
Name	e of Contact Person		ode & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:			
S35 Filing Fee	□\$43.75 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amen Divisi The C 2415	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

CLUTCH GENE, INC.		
	Corporation as currentl	y filed with the Florida Dept. of State)
223000074732		
	(Document Number o	f Corporation (if known)
ursuant to the provisions of section 607.10 s Articles of Incorporation:	06, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(
. If amending name, enter the new nam	e of the corporation:	
AME		The new
ame must be distinguishable and contain th Inc.," or Co.," or the designation "Cor chartered." "professional association." of	p." "Inc." or "Co". 📝	company," or "incorporated" or the abbreviation "Corp"  A professional corporation name must contain the word
3. Enter new principal office address, if applicable:		SAME
Principal office address MUST BE A STR		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SAME
. If amending the registered agent and/ new registered agent and/or the new r	or registered office add registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	AME	
		:
_	(Florida str	eet address)
No Boston 100 (11)	·	•
New Registered Office Address:	<del></del>	(City) (Zip Code)
lew Registered Agent's Signature, if cha hereby accept the appointment as registere	nging Registered Agent ed agent. I am familiar t	<u>:</u> with and accept the obligations of the position.
	Signature of New R	egistered 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	<u>PT</u>	John Doe	
$\underline{X}$ Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
I) X Change	VP	LUIZ CALDEIRA	740 MADEIRA AVENUE
Add			CORAL GABLES, FL. 33134 UN
Remove			
2) Change		<del>-</del>	<u> </u>
Add			
Remove Change		<u> </u>	
Add			
Remove			
1) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
INCLUDE THE EIN NUMBER: 93-4025500	
	<u> </u>
	•
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
N/A	
<del></del>	<u></u>
	<del>_</del>

• .

• • •

	10/20/2023			
The date of each amendment(s) ado date this document was signed.	ption:			, if other than the
Effective date <u>if applicable</u> :				
	(no more that	n 90 days after a	mendment file date)	, <del></del> -
Note: If the date inserted in this blood document's effective date on the Depart			y 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.	ed by the incorporators,	or board of direc	etors without shareholder a	action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi		The number of v	rotes cast for the amendme	ent(s)
☐ The amendment(s) was/were appromust be separately provided for ea				ement
"The number of votes cast fo	r the amendment(s) was/	were sufficient f	or approval	
by	(voting group)		·"	
October 20, 2 Dated Signature	all a		·	
selected, I		the hands of a re	ors or officers have not be eceiver, trustee, or other c	
_	(Typed or printe	us Ge	3~~~	· -
	(Typed or printe	ed name of perso	on signing)	<del></del>
	Price	aut		•

(Title of person signing)