P23000074832

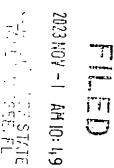
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A. BUTLER NOV 1 3 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HOSPITALITY K	INGS. INC.	
DOCUMENT NUMBER: P23000074832		
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
DON FALLENBAUM		
	Name of Contact Persor	
FALLENBAUM CPA & AD	VISORS, LLC	
	Firm/ Company	
800 PARKVIEW DR #820		
	Address	
HALLANDALE BEACH, FL	. 33009	
	City/ State and Zip Code	:
DON@FALLENBAUMCPA	.COM	
	ed for future annual report	notification)
For further information concerning this matter, please DON FALLENBAUM		(15, 4272)
Name of Contact Person	at () 615-4272
Name of Contact Person	Area Coc	le & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee \$\Bigci \sum \\$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Divisior The Ce 2415 N	Address ment Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2023 NOY - 1 AM 10: 49 HOSPITALITY KINGS INC (Name of Corporation as currently filed with the Florida Dept. of State) P23000074832 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. 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 Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: _, Florida_ (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept 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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	n <u>ith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	P	_	ROBER SURES	1621 SE 3RD CT E
Add				DEERFIELD BEACH, FL 33441
X Remove				
2) Change	<u>Р</u>		ROBERT SURES	1621 SE 3RD CT E
X Add				DEERFIELD BEACH, FL 33441
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	Iding additional Art sheets, if necessary).	(Be specific)			
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an amendment	provides for an exch	nange, reclassificati	ion or cancellatio	n of issued charge	
	plementing the ame	ndment if not cont	ained in the amen	dment itself:	
<u>rovisions for im</u>	able, indicate N/A)				
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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable:</u>		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, thi Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder	action and shareholder
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendm sufficient for approval.	ent(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	lement
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
10/30/23 Dated	BA En	
select	director, president or other officer – if directors or officers have not be ed, by an incorporator – if in the hands of a receiver, trustee, or other onted fiduciary by that fiduciary)	en court
	ROBERT SURES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	