P24000020369

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	OF CORPORATION:				
DOCUMENT NUMB					
The enclosed Articles of	f Amendment and fee are su	binitted for filing.			
Please return all corresp	oondence concerning this ma	tter to the following:			
	El, Prince J.				
_	Name of Contact Person				
	SILVER FOX ENT, INC				
-	Firm/ Company				
	7901 4TH ST N STE 300				
_	Address				
	ST. PETERSBURG, FL 33702				
_	City/ State and Zip Code				
	FONABIMBOLA@GMAIL.COM				
_	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
El. Prince J.		786	496 - 2998		
Name of	*Contact Person	Area Co	496 - 2998 de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	ortment of State:		
S35 Filing Fee	□\$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 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SILVER FOX ENT. INC (Name of Corporation as currently filed with the Florida Dept. of State) P24000020368 (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) N/A , Florida N/A (City) (Zip Code) New Registered Office Address: 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.

N/A
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:

tAttach additional sheets, if necessary)

Example:

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.

X Change	<u>PT</u>	<u>John Doc</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	•
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	_ S	El, Prince	7901 4TH ST N STE 300
X Add			St. Petersburg, FL 33702
Remove			
2) Change			w
Add			
Remove Change			
Add			
Remove			
4) Change			 ,
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			

	if necessary). (Be s	•			
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n amendment provide	es for an exchange :	rentassifination as	cancellation of	cenad chama	
ovisions for implemen	ting the amendmen	t if not contained	in the amendmen	<u>asacu snarys.</u> 1t itself:	
(if not applicable, ind	licate N/A)				
		,			
		N/A		_	
				<u> </u>	
		~ ~			

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The date of each amendment(s)	adoption:	N/A	, if other than the
date this document was signed.			
Effective date <u>if applicable:</u>		N/A	
	(no more	than 90 days after amendment file	date)
Note: If the date inserted in this document's effective date on the I	block does not meet the Department of State's reco	applicable statutory filing requirords.	ements, this 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 incorporato	rs, or board of directors without s	hareholder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were		rs. The number of votes cast for the	he amendment(s)
		ers through voting groups. The followled to vote separately on the ame	
"The number of votes can	st for the amendment(s) w	vas/were sufficient for approval	
by	~ /A	••	
· · · · · · · · · · · · · · · · · · ·	~ /A (voting group)	·	
Da ted	15 MAY 2024		
Signature	ARRICO ST.		SEC AS OF 15 MAYZWZY
select		r officer If directors or officers f in the hands of a receiver, truste iciary)	
	, ,	El, Prince J.	•
	(Typed or pr	rinted name of person signing)	
		Secretary	

(Title of person signing)

• • • •